

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

Marshall

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)
Pat Brooks for Supervisor

IMPORTANT: Indicate by # type of committee you are reporting for:
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:
Candidate Name: Patrick W. Brooks
Political Party (if applicable): Democrat
Office Sought: Marshall County Board of Supervisors
District (if Senate or House):

FORM DR-2 DISCLOSURE REPORT
For Office Use Only
Comm. # 17955
Logged In
Scanned pm
Computer pm
Audited pm
File with: Iowa Ethics and Campaign Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-3701

S

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Signature: Patrick W. Brooks, May 10, 2006
Telephone: 641-753-9134
Date Signed: May 10, 2006

I AM FILING A election-May 19 REPORT FOR (1) ELECTION (2) NONELECTION YEAR.
Indicate by #

CHECK IF AMENDMENT TO REPORT DATED

Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
11-07-06
County & Local Committees, enter County in which Election is held
Marshall

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (zero), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: \$795.00, Schedule F: \$600.00, Schedule H: zero), SUB-TOTAL (\$1,395.00), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: \$637.34, Schedule F: -0-), CASH ON HAND at the end of this reporting period (\$757.66).

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ -0-
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ -0-
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ \$600.00

CONSULTANT BREAKDOWN (Schedule G Attached?) YES [X] NO [XX]

CANDIDATE COMMITTEES ONLY:
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 312.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

| | |
|--|-------------------|
| SCHEDULE A (Rev. 07/03) | MONETARY RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Pat Brooks for Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | ✓ IF FOR FUND-RAISER INCOME |
|--------------------------|--|--|--|----------------------|-----------------------------|
| 3-22-2006 | ID# CK# | Pat Brooks-loan to account 611 Jerome St., Marshalltown, Iowa 50158 | N/A <i>or Sch or F</i> | \$ 100.00 | <input type="checkbox"/> |
| 5-01-06 | ID# CK# | Loras Neuroth, 303 S. 12th St., Marshalltown, Ia 50158 | N/A | \$50.00 | <input type="checkbox"/> |
| 5-01-06 | ID# CK# | Craig Shepherd, 417 N 8th St., Marshalltown, Ia 50158 | N/A | \$100.00 | <input type="checkbox"/> |
| 5-01-06 | ID# CK# | Floyd P. Harthun, 6 Highland Acres Rd., Marshalltown, Ia 50158 | N/A | \$100.00 | <input type="checkbox"/> |
| 5-02-06 | ID# CK# | Beth Harrison, 1701 West Olive St., Marshalltown, Ia 50158 | N/A | \$200.00 | <input type="checkbox"/> |
| 4-25-06 | ID# CK# | Pat Brooks-loan to campaign account, 611 Jerome St. Marshalltown, Ia 50158 | N/A <i>or Sch or F</i> | \$500.00 | <input type="checkbox"/> |
| 5-05-06 | ID# CK# | Dwayne C. Garber, 3250 120th St., Beaman, Ia 50609 | N/A | \$100.00 | <input type="checkbox"/> |
| 5-05-06 | ID# CK# | Dick Hassenius, 1007 Henry Drive, Marshalltown, Ia 50158 | N/A | \$ 20.00 | <input type="checkbox"/> |
| 5-06-06 | ID# CK# | Curtis A. Ward, 2501 W. Lincoln Way, Marshalltown, Ia 50158 | N/A | \$100.00 | <input type="checkbox"/> |
| 5-09-06 | ID# CK# | Ellen Bergman, 404 N. 5th St, Marshalltown, Ia 50158 | N/A | \$125.00 | <input type="checkbox"/> |

\$750.00 limit reached 5-01-06

SUB-TOTAL

TOTAL (if last page of this schedule)

~~\$1,395.00~~ S/B
\$1,395.00 795.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

| | |
|---|--------------------------|
| SCHEDULE B (Rev. 07/03) | MONETARY EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
Pat Brooks for Supervisor

| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
|--|--|---|--------------------------------|-----------------|
| 3-28-06 | ID# CK# | Cline Photo, 18 E. State, Marshalltown, Ia 50158 | photo service | \$16.05 |
| 4-4-06 | ID# CK# | Cline Photo, 18 E. State, Marshalltown, Ia 50158 | copies of photo | \$17.12 |
| 4-23-06 | ID# CK# | Marshall County Auditor % Marshall County Courthouse Marshalltown, Ia 50158 | purchase voter list | \$23.00 |
| 5-01-06 | ID# CK# | Minuteman, Inc. 101 S. 1st St. Marshalltown, Ia 50158 | copy service | \$4.28 |
| 5-05-06 | ID# CK# | Center Shoppes 10 E. Main St. Marshalltown, Ia 50158 | card purchase | \$12.68 |
| 5-04-06 | ID# CK# | Carter Printing 1739 East Grand Ave Des Moines, Ia 50316 | purchase campaign cards | \$364.64 |
| 5-05-06 | ID# CK# | US Post Office Marshalltown, Ia 50158 | purchase stamps | \$117.00 |
| XXX 5-08-06 | ID# CK# | Minuteman, Inc 101 S. 1st St., Marshalltown, Ia 50158 | copy service | \$2.68 |
| SUB-TOTAL | | | | \$557.45 |
| TOTAL (if last page of this schedule) | | | | \$ |

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

| | |
|---|--------------------------|
| SCHEDULE B (Rev. 07/03) | MONETARY EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
Pat Brooks for Supervisor

| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
|--|--|--|------------------------------------|-----------------|
| 5-09-06 | ID# CK# | US Post Office Marshalltown, Ia 50158 | purchase stamps | \$ 48.00 |
| 4-04-06 | ID# CK# | Wells Fargo Bank 666 Walnut St. Des Moines, Ia 50309 | purchase checks for account use | \$29.75 |
| 4-18-06 | ID# CK# | Wells Fargo Bank 666 Walnut St. Des Moines, Ia 50309 | monthly service fee | \$2.14 |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ 79.89 / |
| TOTAL (if last page of this schedule) | | | | \$ 637.34 / |

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)
 Pat Brooks for Supervisor

| | |
|--|-------------------------------|
| SCHEDULE F (Rev. 07/03) | LOANS RECEIVED & REPAID |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

| DATE RECEIVED (MM/DD/YR) | NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) | RELATIONSHIP TO CANDIDATE (If Applicable*) | AMOUNT OF LOAN |
|--------------------------|---|--|----------------|
| 3-22-06 | Pat Brooks, candidate 611 Jerome St., Marshalltown, Ia 50158 | | \$100.00 |
| 4-25-06 | | | \$500.00 |
| | | | |
| | | | |
| | | | |

TOTAL (PART I) \$ 600.00

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

| DATE PAID (MM/DD/YR) | NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) | RELATIONSHIP TO CANDIDATE* (If Applicable) | AMOUNT REPAID |
|----------------------|---|--|---------------|
| 3-22-06 | Pat Brooks, candidate 611 Jerome St., Marshalltown, Ia 50158 | | \$0.00 |
| | | | |
| | | | |
| | | | |
| | | | |

TOTAL CASH REPAYMENTS (PART II) \$ _____
 From Schedule E -- TOTAL LOANS FORGIVEN \$ _____
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 600.00

*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

COMMITTEE NAME (Must be same as on Statement of Organization)
 Pat Brooks for Supervisor

Reset Form

| | |
|---|----------------------|
| SCHEDULE H (Rev. 07/03) | CAMPAIGN PROPERTY |
| ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED. | |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY

PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY **

| Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR) | Description of Property | Purchase Price or Est. Value When Acquired* | Current Value at Fair Market This Report |
|--|-------------------------|---|--|
| 5-04-06 | campaign cards | \$364.64 | \$300.00 |
| 5-05-06 | cards | \$12.68 | \$12.00 |
| | | | |
| | | | |
| | | | |

| Date (MM/DD/YR) | Name and Address of Purchaser/Donee | Description of Property | Sold? Y/N | Sale Price | Value of Donation |
|-----------------|-------------------------------------|-------------------------|-----------|------------|-------------------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 312.00

** PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ _____ TOTALS \$ _____ \$ _____

* If estimated, show est. beside figure.

(Attach Additional Schedules if Needed)