

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

RECEIVED

Vote YES Committee

FAX
SEP - 6 2006

IMPORTANT: Indicate by # type of committee you are reporting for. 1

(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 _____ Political Party (if applicable) _____
 Office Sought _____ District (if Senate or House) _____

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.

Ellen B. Bergman
SIGNATURE OF PERSON FILING REPORT

641-753-3365
TELEPHONE

9-6-06
DATE SIGNED

I AM FILING A 09/07/06 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

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 <u>09/12/06</u>
County & Local Committees, enter County in which Election is held <u>Marshall</u>

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	\$ 0.00
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)	28,560.00
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ 28,560.00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	3,414.18
Schedule F: Loan Repayments total (Attach Schedule F)	0.00
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).	\$ 25,145.82
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 0.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 0.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO
CANDIDATE COMMITTEES ONLY:	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ _____
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)
Vote YES Committee

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
07/17/06	ID# CK#	Independent Insurance Services P. O. Box 248 Marshalltown, IA 50158		\$500.00	<input type="checkbox"/>
07/17/06	ID# CK#	M. Gervich & Sons, Inc. P. O. Box 67 Marshalltown, IA 50158		300.00	<input type="checkbox"/>
07/17/06	ID# CK#	Loras J. Neuroth 303 South 1st Street Marshalltown, IA 50158		250.00	<input type="checkbox"/>
07/21/06	ID# CK#	Conrad A. Dejardin 109 New Castle Road Marshalltown, IA 50158		100.00	<input type="checkbox"/>
7/21/06	ID# CK#	Tim A. Wynes Marshalltown, IA 50158		200.00	<input type="checkbox"/>
7/27/06	ID# CK#	Marshalltown Medical & Surgical Center 3 South 4th Avenue Marshalltown, IA 50158		10000.00	<input type="checkbox"/>
8/10/06	ID# CK#	Gregg D. Miller P. O. Box 841 Marshalltown, IA 50158		50.00	<input type="checkbox"/>
8/10/06	ID# CK#	Sarah Hesmer 2003 Timberline Road Marshalltown, IA 50158		100.00	<input type="checkbox"/>
8/10/06	ID# CK#	Maureen M. Lyons 2002 Elmcrest Drive Marshalltown, IA 50158		50.00	<input type="checkbox"/>
8/10/06	ID# CK#	Susan Jo Martin 2349 Whispering Oaks Road Marshalltown, IA 50158		50.00	<input type="checkbox"/>

SUB-TOTAL
\$ 11600.00

TOTAL (if last page of this schedule)
\$

* 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.

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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)
Vote YES Committee

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8/10/06	ID# CK#	Barb Hagstrand 19 South 2nd Avenue Marshalltown, IA 50158		\$25.00	<input type="checkbox"/>
8/10/06	ID# CK#	William Bestmann 1914 Knollwood Drive Marshalltown, IA 50158		25.00	<input type="checkbox"/>
8/10/06	ID# CK#	Cindy McLain 23817-667th Avenue Nevada, IA 50158		25.00	<input type="checkbox"/>
8/10/06	ID# CK#	Michael Miller 1401 Emerald Drive Marshalltown, IA 50158		50.00	<input type="checkbox"/>
8/10/06	ID# CK#	Paul C. Hermanson 411 Innes Blvd Marshalltown, IA 50158		100.00	<input type="checkbox"/>
8/10/06	ID# CK#	Janelle Andersen Carter 610 Elmwood Drive Marshalltown, IA 50158		100.00	<input type="checkbox"/>
8/10/06	ID# CK#	Home Federal Savings Bank 303 West Main Street Marshalltown, IA 50158		500.00	<input type="checkbox"/>
8/10/06	ID# CK#	George Johnson 617 Jerome Street Marshalltown, IA 50158		100.00	<input type="checkbox"/>
8/10/06	ID# CK#	Keith Bloomquist 2313 Knollway Drive Marshalltown, IA 50158		50.00	<input type="checkbox"/>
8/10/06	ID# CK#	Janet W. Mead 2235 Summit Road Marshalltown, IA 50158		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1075.00	
TOTAL (if last page of this schedule)				\$	

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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)
Vote YES Committee

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.

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8/16/06	ID# CK#	Robert Cooper 613 Elmwood Drive Marshalltown, IA 50158		\$100.00	<input type="checkbox"/>
8/16/06	ID# CK#	Dick Hierstein 2515 South 8th Street Marshalltown, IA 50158		50.00	<input type="checkbox"/>
8/16/06	ID# CK#	Patrick Brooks 611 Jerome Street Marshalltown, IA 50158		25.00	<input type="checkbox"/>
8/16/06	ID# CK#	John Hermanson 2407 New Salem Road Marshalltown, IA 50158		25.00	<input type="checkbox"/>
8/16/06	ID# CK#	Stephen A. Kenkel 103 East High Toledo, IA 52432		250.00	<input type="checkbox"/>
8/16/06	ID# CK#	Clapsaddle-Garber Associates, Inc. P. O. Box 754 Marshalltown, IA 50158		250.00	<input type="checkbox"/>
8/16/06	ID# CK#	Stroh Corporation 5000 Park Avenue Des Moines, IA 50321		50.00	<input type="checkbox"/>
8/16/06	ID# CK#	Raymon Donco Air Distribution Equipment P. O. Box 250, Albion, IA 50005		200.00	<input type="checkbox"/>
8/16/06	ID# CK#	Lennox Manufacturing 200 South 12th Avenue Marshalltown, IA 50158		1000.00	<input type="checkbox"/>
8/16/06	ID# CK#	Racom Corporation P. O. Box 574 Marshalltown, IA 50158		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2150.00	
TOTAL (if last page of this schedule)				\$	

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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)
Vote YES Committee

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8/16/06	ID# CK#	John F. Veldey 912 West Main Street Marshalltown, IA 50158		\$25.00	<input type="checkbox"/>
8/22/06	ID# CK#	Marshalltown Company 204 South 8th Avenue Marshalltown, IA 50158		500.00	<input type="checkbox"/>
8/22/06	ID# CK#	McFarland Clinic 1215 Duff Avenue Ames, IA 50010		200.00	<input type="checkbox"/>
8/22/06	ID# CK#	Board of Trustees of Ellsworth College Iowa Falls, IA 50126		5000.00	<input type="checkbox"/>
8/22/06	ID# CK#	Robert Berger 1704 Robertson Drive Marshalltown, IA 50158		50.00	<input type="checkbox"/>
8/23/06	ID# CK#	Leo E. Herrick 2106 South 12th Street Marshalltown, IA 50158		250.00	<input type="checkbox"/>
8/23/06	ID# CK#	Gene Beach 408 Edgeland Drive Marshalltown, IA 50158		50.00	<input type="checkbox"/>
8/23/06	ID# CK#	Barbara Burrows 507 North 16th Street Marshalltown, IA 50158		100.00	<input type="checkbox"/>
8/23/06	ID# CK#	Dale Ites 2019 Elmerest Drive Marshalltown, IA 50158		50.00	<input type="checkbox"/>
8/23/06	ID# CK#	Citizens Banking Corp P. O. Box 1675 Flint, MI 48501		500.00	<input type="checkbox"/>
SUB-TOTAL				\$ 6725.00	
TOTAL (if last page of this schedule)				\$	

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Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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

Vote YES Committee

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8/23/06	ID# CK#	John Collison, DDS 210 West Main Street Marshalltown, IA 50158		\$25.00	<input type="checkbox"/>
8/23/06	ID# CK#	United Bank & Trust Marshalltown, IA 50158		250.00	<input type="checkbox"/>
8/24/06	ID# CK#	G. Ward Miller 2009 Gethmann Drive Marshalltown, IA 50158		25.00	<input type="checkbox"/>
8/24/06	ID# CK#	Robert Bauer 2859 190th Street Marshalltown, IA 50158		100.00	<input type="checkbox"/>
8/24/06	ID# CK#	Lynn N. Cripps 211 Rainbow Drive Marshalltown, IA 50158		50.00	<input type="checkbox"/>
8/24/06	ID# CK#	Larry E. Mckibben 1703 Robertson Drive Marshalltown, IA 50158		25.00	<input type="checkbox"/>
8/24/06	ID# CK#	Joel Akason 1009 Fremont Street Marshalltown, IA 50158		25.00	<input type="checkbox"/>
8/24/06	ID# CK#	Kileen Rezac 1112 West Olive Street Marshalltown, IA 50158		100.00	<input type="checkbox"/>
8/24/06	ID# CK#	Marsden Bldg. Maintenance, LLC 2801 Bell Avenue Des Moines, IA 50158		25.00	<input type="checkbox"/>
8/24/06	ID# CK#	Emerson Electric Co. 8000 West Florissant Avenue St. Louis, MO 63136		5000.00	<input type="checkbox"/>

SUB-TOTAL

\$ 5625.00

TOTAL (if last page of this schedule)

\$

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

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

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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
08/25/06	ID# CK#	Roger Grotchuschen 2003 Catalina Place Marshalltown, IA 50158		\$50.00	<input type="checkbox"/>
08/25/06	ID# CK#	Susan Malloy 3304 Merritt Road Marshalltown, IA 50158		25.00	<input type="checkbox"/>
08/25/06	ID# CK#	Wells Fargo Bank, N.A. 90 South 7th Street Minneapolis, MN 55479		500.00	<input type="checkbox"/>
08/29/06	ID# CK#	Rex Ryden 507 Highland Drive Marshalltown, IA 50158		50.00	<input type="checkbox"/>
08/29/06	ID# CK#	Deane Adams 509 Thunderbird Drive Marshalltown, IA 50158		10.00	<input type="checkbox"/>
08/29/06	ID# CK#	Home Rental Center & Sales Co. 603 S. 6th Street Marshalltown, IA 50158		100.00	<input type="checkbox"/>
08/30/06	ID# CK#	Ellen Bergman 404 North 5th Street Marshalltown, IA 50158		150.00	<input type="checkbox"/>
08/30/06	ID# CK#	Marshalltown Area Chamber of Commerce 709 S. Center Street, P. O. Box 1000 Marshalltown, IA 50158		500.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL
\$ 1385.00

TOTAL (if last page of this schedule)
\$ 28560.00

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Reset Form

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)
Vote YES Committee

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
07/18/06	ID# CK# 1001	Marshalltown Post Office Marshalltown, IA 50158	Post Office Box Rent	\$ 22.00
07/27/06	ID# CK# 1002	Bill Grabe 1211 West Main Street Marshalltown, IA 50158	Reimbursement for Committee Lunch	100.00
07/27/06	ID# CK# 1003	Hy Vee 802 South Center Street Marshalltown, IA 50158	Committee Lunch	84.05
07/27/06	ID# CK# 1004	Staples 27 West Berle Road Marshalltown, IA 50158	Stationery and Envelopes	30.46
08/01/06	ID# CK# 1005	MinuteMan, Inc. 101 South 1st Street Marshalltown, IA 50158	Copies	9.70
08/01/06	ID# CK# 1006	Pizza Ranch 1914 Edgington Avenue Eldora, IA 50627	Committee Lunch	49.44
08/01/06	ID# CK# 1007	Staples 27 West Berle Road Marshalltown, IA 50158	Envelopes and Postage Stamps	17.95
08/02/06	ID# CK# 1008	E & F Printing 295 South 3rd Avenue Marshalltown, IA 50158	Return Address Envelopes	21.35
SUB-TOTAL				\$ 334.95
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 88A 402(3)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

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

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

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
08/02/06	ID# CK# 1009	Marshalltown Post Office Marshalltown, IA 50158	Postage for Mailing	\$ 39.00
08/10/06	ID# CK# 1010	Hy Vee 802 South Center Street Marshalltown, IA 50158	Committee Lunch	48.20
08/17/06	ID# CK# 1011	Marshalltown Post Office Marshalltown, IA 50158	Postage for Mailing	19.50
08/18/06	ID# CK# 1012	E & F Printing 295 South 3rd Avenue Marshalltown, IA 50158	Return Address Envelopes	9.74
08/21/06	ID# CK# 1013	Hy Vee 802 South Center Street Marshalltown, IA 50158	Committee Planning Lunch	192.28
08/21/06	ID# CK# 1014	The Swanson Corp 3200 South 60th Street Omaha, NE 68106	Committee Planning Lunch	121.60
08/23/06	ID# CK# 1015	Iowa Falls Post Office 401 Main Street Iowa Falls, IA 50126	Postage for Mailing	97.50
08/24/06	ID# CK# 1016	L & L Murphy Consulting 531 Sixth Street NW Oelwein, IA 50662	Campaign Strategy Planning	2500.00
SUB-TOTAL				\$ 3027.82
TOTAL (If last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$600 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 88A.402(3)(i))

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

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

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
08/24/06	ID# CK# 1017	Iowa Falls Post Office 401 Main Street Iowa Falls, IA 50126	Postage for Mailing	\$ 23.40
08/29/06	ID# CK# 1018	Wal Mart 2802 South Center Street Marshalltown, IA 50158	Cookies for Committee Meeting	28.01
	ID# CK#			
SUB-TOTAL				\$ 51.41
TOTAL (if last page of this schedule)				\$ 3414.18

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).)