

# DISCLOSURE SUMMARY PAGE

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

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

CITIZENS FOR JO ANNE CORIGLIANO

IMPORTANT: Indicate by # type of committee you are reporting for: 6

( 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 ) Ethics and Campaign Disclosure Board or Other Political Subdivision PAC  
 ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name: JO ANNE CORIGLIANO Political Party (if applicable): DEMOCRAT

Office Sought: DES MOINES CITY COUNCIL District (if Senate or House): \_\_\_\_\_

IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD  
 DEC - 7 2006  
 FILED 10 HR

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.

William J. Haddad Treas.      515-285-6294      12-7-06  
 SIGNATURE OF PERSON FILING REPORT      TELEPHONE      DATE SIGNED

I AM FILING A DECEMBER 7, 2006 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>12-12-06</u>
County & Local Committees, enter County in which Election is held	<u>POLK</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 <b>MUST</b> 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.)	\$ <u>0</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>2,760.00</u>
Schedule F: Loans Received total (Attach Schedule F)	<u>0</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	<u>0</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ <u>2,760.00</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	<u>920.96</u>
Schedule F: Loan Repayments total (Attach Schedule F)	<u>0</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ <u>1,839.04</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ <u>0</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ <u>100.00</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ <u>0</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<b>CANDIDATE COMMITTEES ONLY:</b>	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ <u>0</u>

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

CITIZENS FOR JO ANNE CORIGLIANO

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/YY)	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
08-30-06	ID# CK# 20764	RONALD WOODS 1204 SE HARTFORD BLDGC SUITE 27 DES MOINES IA 50315		\$ 500.00	
08-30-06	ID# CK# CASH	FRANK V REYNOLDS 111 - 19TH ST MARION, IA 52302	BROTHER	100.00	
09-02-06	ID# CK# 7855	JAMES O. BOYT 6700 CARPENTER DES MOINES, IA 50311		100.00	
09-06-06	ID# CK# CASH	DAVID CUPP 604 CAULDER DES MOINES, IA 50315		100.00	
10-04-06	ID# CK# 4609	WILLIAM T PURCELL ANITA D PURCELL 4317 SE 3RD ST DES MOINES IA 50315		100.00	
10-04-06	ID# CK# 7482	WENDELL L BECK BARBARA L BECK 339 SE PARK AVE DES MOINES, IA 50315		25.00	
10-05-06	ID# CK# CASH	RONALD WOODS 1204 SE HARTFORD BLDGC SUITE 27 DES MOINES IA 50315		500.00	
10-07-06	ID# CK# 3177	JO ANN HESSE BARRY R HESSE 5005 SW 16TH ST DES MOINES IA 50315		50.00	
10-13-06	ID# CK# 7196	JAMES D NEWELL NANETTE M NEWELL 700 W. NORTH ST POBOX 252 PRAIRIE CITY IA 50218-0252		100.00	
11-08-06	ID# CK# CASH	TOM AKERS 129 MARLOU PKWY GREENFIELD TOWNSHIP DES MOINES, IA 50315		50.00	

SUB-TOTAL

\$ 1,625.00

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.

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
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COMMITTEE NAME (Must be same as on Statement of Organization)  
**CITIZENS FOR JO ANNE CORIGLIANO**

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11-08-06	ID# CK# 6122	BILL L PETERS 1900 1/2 MCKINLEY AVE DES MOINES, IA 50315		\$ 250.00	
11-10-06	ID# CK# 5858	NANCY E KUENLEN 359 NW 50TH PLACE DES MOINES IA 50313		10.00	
11-19-06	ID# CK# 7882	ROBERT L MAHAFFEY B JOANNE MAHAFFEY 2220 E. 22ND ST DES MOINES IA 50317-3108		100.00	
11-20-06	ID# CK# CASH	UNITEMIZED CONTRIBUTIONS		40.00	✓
11-20-06	ID# CK# 5611	WILLIAM P MSCOY MARY ANN MSCOY 3127 SW 6TH DESMOINES IA 50315		20.00	✓
11-20-06	ID# CK# 9249	PETE J. LEB ESTHER M LEB 3515 TRUBER PL DES MOINES IA 50315		25.00	✓
11-20-06	ID# CK# 13649	ANGELO J PALMER CHARLOTTE A PALMER 405 E MILLER AVE DES MOINES IA 50315-2849		25.00	✓
11-20-06	ID# CK# 5636	PHYLLIS CACCIATORE 3405 SE 4TH ST DES MOINES IA 50315-2822		50.00	✓
11-28-06	ID# CK# CASH	UNITEMIZED CONTRIBUTIONS		65.00	✓
11-28-06	ID# CK# 1489	LINDA L MCCARTHY 5201 SE 32ND ST DES MOINES IA 50320		100.00	✓

SUB-TOTAL

\$ 685.00

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

CITIZENS FOR JO ANNE CORIGLIANO

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11-28-06	ID# CK# 7999	JUDITH K ELLIOTT DENNIS M ELLIOTT 114 SW WATROUS DES MOINES IA 50315-3529		\$ 20.00	✓
11-28-06	ID# CK# 3651	APRIL M STAMPER PATRICK D STAMPER 2929 SE 7TH DES MOINES IA 50315		25.00	✓
11-28-06	ID# CK# 8926	BRIAN C MILLARD 3920 LYNNER DR DES MOINES IA 50310-5837		20.00	✓
11-28-06	ID# CK# 2912	RUBY D BEALL 709 - 34TH ST SPT 2 DES MOINES IA 50312		30.00	✓
11-28-06	ID# CK# 1673	J MELVIN KEUL FARM ACCOUNT 1009 E. LACONA DES MOINES IA 50315		100.00	✓
11-30-06	ID# CK# 1186	THOMAS C REYNOLDS TRINA R REYNOLDS 47 BITTERSWEET DR GALES FERRY CT 06335	NEPHEW	100.00	
11-30-06	ID# CK# 10320	TONI EILBERT RICHARD EILBERT 7402 SW 12TH ST DES MOINES IA 50315		40.00	
11-30-06	ID# CK# 13217	CHARLES D EILBERT SUSAN A EILBERT 1680 E DIEHL AVE DES MOINES IA 50320-1739		30.00	
12-02-06	ID# CK# CASH	UNITEMIZED CONTRIBUTIONS		30.00	
12-02-06	ID# CK# 8353	BETTY F FAZIO SAM W FAZIO 445 E PLEASANTVIEW DR DES MOINES IA 50315-7018		30.00	

SUB-TOTAL

\$ 425.00

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

CITIZENS FOR JO ANNE CORIGLIANO

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12-02-06	ID# CK# 8196	PATRICK A WALSH MARGUERITE F WALSH 5113 SE 31 <sup>ST</sup> CT DES MOINES, IA 50320-2163	COUSIN- IN-LAW	\$ 25.00	
	ID# CK#				

SUB-TOTAL

\$ 25.00

TOTAL (if last page of this schedule)

\$ 2760.00

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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>B</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)  
**CITIZENS FOR JO ANNE CORIGLIANO**

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
09-06-06	ID# CK# BANK CHARGE	WESTBANK 3920 SW 9TH STREET DES MOINES, IA 50315	PRINTED CHECKS	\$ 31.25
09-09-06	ID# CK# T-2	JO ANNE CORIGLIANO 2611 SE 7TH ST. DES MOINES, IA 50315	REIMBURSE COMPUTER TONER 344.88 AND VOTER DATA BASE FROM SECRETARY OF STATE - 13.00	57.88
09-12-06	ID# CK# 1001	POSTMASTER 1165 2ND AVE DES MOINES, IA 50318-9651	RENTAL - BOX 35502 - FOR 6 MONTHS	22.00
09-12-06	ID# CK# BANK CHARGE	WESTBANK 3920 SW 9TH STREET DES MOINES, IA 50315	DEPOSIT STAMP	26.35
09-26-06	ID# CK# 1002	THE KUHN'S GROUP 5133 SE 27TH STREET DES MOINES, IA 50320	INV 3591 - YARD SIGNS (TOTAL 300.00 LESS IN-KIND CONTRIBUTION OF \$100.00 - SEE SCHEDULE E)	200.00
10-30-06	ID# CK# 1003	POSTMASTER 1165 2ND AVE DES MOINES, IA 50318-9651	RECEIPT # 3 IMPRINT # 109 BULK MAIL IMPRINT	160.00
11-11-06	ID# CK# 1004	JEANNE HADDAD 919 WATROUS DES MOINES, IA 50315-3025	REIMBURSEMENT - PRINTING CAMPAIGN FLYERS - OFFICE MAX	36.58
11-21-06	ID# CK# 1005	JO ANNE CORIGLIANO 2611 SE 7TH ST. DES MOINES, IA 50315	REIMBURSEMENT - 1000 CAMPAIGN MAILERS - COLOR BOTH SIDES - FROM HARVEST PRINT & COPY CENTER	386.90
SUB-TOTAL				\$ 920.96
TOTAL (if last page of this schedule)				\$ 920.96

**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).)

