

DISCLOSURE SUMMARY PAGE

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

COMMITTEE TO ELECT TIM BRIEN

IMPORTANT: Indicate by # type of committee you are reporting for: 5
 (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

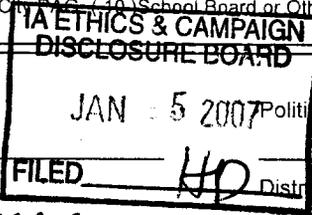
CANDIDATE COMMITTEES ONLY:

Candidate Name TIM BRIEN

Office Sought POLK COUNTY RECORDER

Political Party (if applicable) _____

District (if Senate or House) _____



FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>17324</u>	
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	

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.

RR (RON RICKER) 515-283-2369 1/5/07
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 10-15-06 THROUGH 12-31-06 REPORT FOR (1) ELECTION // (2) NON-ELECTION YEAR.
 (report date) Indicate by #

CHECK IF AMENDMENT TO REPORT DATED N/A

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>NOVEMBER 7, 2006</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 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.)	\$	<u>4,081.70</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		<u>3,090.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>1,000.00</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>8,171.70</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>6,717.15</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>1,454.55</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....	\$	<u>- 0 -</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$	<u>- 0 -</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>10,027.62</u> (LOANS FORGIVEN)
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$	<u>- 0 -</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO	
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>- 0 -</u>
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.		

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT TIM BRIEN

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.

CAUTION: Section 68B.32A(6), Iowa Code, 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 FOI FUND-RAISER INCOME
10/20/06	ID# CK# N/A	DEAN A. or DEANA LERNER 5220 SHRIVER AVE DES MOINES, IA 50312	N/A	\$ 20.00	
10/20/06	ID# CK# N/A	JAMES or JANE DAFFY 320A BENTON AVE DES MOINES, IA 50310	N/A	10.00	
10/20/06	ID# CK# N/A	THOMAS D FOLLETT 9909 HAMMONTREE DR DES MOINES, IA 50322	N/A	25.00	
10/20/06	ID# CK# N/A	JOSEPH L. GRANDANETTE 637 46 th ST DES MOINES, IA 50312	N/A	25.00	
10/20/06	ID# CK# N/A	JOSEPH A. BISIGNINO 4949 WESTOWN PRINCY #110 WEST DES MOINES, IA 50266	N/A	25.00	
10/20/06	ID# CK# N/A	KERMIT J. MARSH 1408 N.W. 103 rd ST CLIVE, IOWA 50325	N/A	25.00	
10/20/06	ID# CK# N/A	JAMES V. RASH 4200 E. DOUGLAS DES MOINES, IA 50317	N/A	25.00	
10/20/06	ID# CK# N/A	MICHAEL MCILHON 1700 NORTHWEST DR. DES MOINES, IA 50310	N/A	25.00	
10/20/06	ID# CK# N/A	RICK PASTZBORN 101 NE. 72 nd PL. ANKENY, IA 50023	N/A	100.00	
10/20/06	ID# CK# N/A	J. MICHAEL DEBBE 1601 22 nd ST Suite 300 WEST DES MOINES, IA 50266	N/A	100.00	
SUB-TOTAL				\$ 380.00	
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) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

A (Rev. 08/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT TIM BRIEN

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10/20/06	ID# CK# N/A	JOHN R WARD 4029 ASHBY AVE DES MOINES, IA 50310	N/A	\$ 50.00	
10/20/06	ID# CK# N/A	PETER J. KIERNAN 4109 29 th ST DES MOINES IA 50310	N/A	20.00	
10/20/06	ID# CK# N/A	WILLIAM J. LILLEIS 3000 PATRIKIA DR DES MOINES, IA 50322	N/A	100.00	
10/20/06	ID# CK# N/A	TIM & DIANE FINLEY 3917 RUBEN OAKS DR DES MOINES IA 50312	N/A	100.00	
10/20/06	ID# CK# N/A	KENNETH P. SCHULTHEIS 3101 FLEAR DR DES MOINES, IA 50321	N/A	50.00	
10/20/06	ID# CK# N/A	KIMBERLY R. GRAZIANO 2015 64 th ST. DES MOINES, IA 50322	N/A	50.00	
10/20/06	ID# CK# N/A	PAUL TYLER 1117 44 th ST DES MOINES IA 50311	N/A	100.00	
10/20/06	ID# CK# N/A	MICHAEL W. D'MALLEY 3919 SHERMAN BLVD DES MOINES IA 50310	N/A	50.00	
10/20/06	ID# CK# N/A	R. TODD GAFFNEY 699 WALNUT ST. 62121900 DES MOINES IA 50309	N/A	100.00	
10/20/06	ID# CK# N/A	JAMES F. O'HALLORAN 3303 BEAVER AVE DES MOINES, IA 50310	N/A	100.00	
SUB-TOTAL				\$ 720.00	
TOTAL (if last page of this schedule)				\$ —	

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CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT TIM BRIEN

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10/20/06	ID# CK# N/A	MARTURIE L. LEE PORTE 7261 N.W. 21 ST ST. ANKONY, IA 50021	N/A	\$ 50.00	
10/20/06	ID# CK# N/A	KATHLEEN HAMRE 14146 PINNACLE PT. DR CLIVE, IOWA 50325	N/A	100.00	
10/20/06	ID# CK# N/A	KEVIN CUNNINGHAM 620 COUNTRY CLUB BLVD DES MOINES IA 50312	N/A	100.00	
10/20/06	ID# CK# N/A	MARY E M'CMANNIS 7608 WILDEN DR URBANDALE, IA 50322	N/A	50.00	
10/20/06	ID# CK# N/A	GEORGE R. KINLEY 1924 WILLOMERE DR DES MOINES, IA 50315	N/A	50.00	
10/20/06	ID# CK# N/A	JANE M. HEMMINGGORE 405 49 TH ST DES MOINES IA 50312	N/A	50.00	
10/20/06	ID# CK# N/A	CECELIA MIKE KENT 5605 WATERBURY RD DES MOINES, IA 50312	N/A	100.00	
10/20/06	ID# CK# N/A	KATHLEEN A. KOPATKA 3917 92 ND DR URBANDALE IA 50322	N/A	50.00	
10/20/06	ID# CK# N/A	MATT DUNCAN 6825 COLBY AVE WINDSOR HEIGHTS, IA 50311	N/A	100.00	
10/20/06	ID# CK# N/A	RATIE DOYLE 3233 86 TH ST DES MOINES, IA 50311	N/A	25.00	
SUB-TOTAL				\$ 675.00	
TOTAL (if last page of this schedule)				\$ —	

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CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

COMMITTEE TO ELECT TIM BRIEN

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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10/20/06	ID# CK# N/A	MICHAEL J. O'KEEFE 4003 KINGMAN BLVD DES MOINES, IA 50311	N/A	\$ 25.00	
11/3/06	ID# CK# N/A	REGINA MACRAE 4125 LOWER BEAUX RD DES MOINES, IA 50310	N/A	25.00	
11/3/06	ID# CK# N/A	ANDREY ROSENBERG 5150 GRAND AVE. DES MOINES, IA 50312	N/A	100.00	
11/3/06	ID# CK# N/A	BENJAMIN ZENTI 7524 ASHLEY DR JOHNSTON, IA 50131	N/A	25.00	
11/3/06	ID# CK# N/A	SPM TOBIS 903 67 th PL WEST DES MOINES, IA 50266	N/A	20.00	
11/3/06	ID# CK# N/A	DEZ PANFANTIN 2917 MILK PKY DES MOINES, IA 50310	N/A	100.00	
11/3/06	ID# CK# N/A	JOY E. HARVEY / ADOLPHSON 4305 NORTHWEST DR DES MOINES, IA 50310	N/A	50.00	
11/3/06	ID# CK# N/A	DENNIS P O'MEARA 4033 RIVERDALE DR. DES MOINES, IA 50312	N/A	50.00	
11/3/06	ID# CK# N/A	ROBERT R SHRECK 5108 WOODLAND AVE DES MOINES, IA 50312	N/A	250.00	
11/3/06	ID# CK# N/A	MARK GRAZIANO 14403 WILDEN DR URBANDALE, IA 50323	N/A	200.00	
SUB-TOTAL				\$ 845.00	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE A (Rev. 06/97)	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)
COMMITTEE TO ELECT TIM BRIEN

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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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
11/3/06	ID# CK# N/A	JO ELLEN MCGRAW 3130 BLAUBER AVE DES MOINES, IA 50310	N/A	\$ 50.00	
11/3/06	ID# CK# N/A	MISC CASH DONATIONS DES MOINES IA	N/A	70.00	
11/3/06	ID# CK# N/A	JOHN W. WASHBURN 2108 33 RD ST. DES MOINES, IA 50310	N/A	50.00	
11/21/06	ID# CK# N/A	Boswell For Congress (Refund) P.O. Box 6220 DES MOINES IA 50305	N/A	250.00	
12/21/06	ID# CK# N/A	KRISTINE 500 35 th Street DES MOINES, IA 50312	N/A	50.00	
	ID# CK#				

SUB-TOTAL
\$470.00
TOTAL (if last page of this schedule)
~~\$3,090.00~~ \$3,090.00

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 09/97)	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)
COMMITTEE TO ELECT TIM BRIEN

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
10/16/06	ID# CK# 269	DES MOINES RADIO GROUP 1416 LOCUST ST DES MOINES IA	RADIO PROMOTION	\$2,000.00
10/16/06	ID# CK# 270	U.S. POSTMASTER 2 ND & UNIVERSITY DES MOINES, IOWA	POSTAGE	290.00
10/23/06	ID# CK# 271	U.S. POSTMASTER 2 ND & UNIVERSITY DES MOINES IA	POSTAGE	480.00
10/17/06	ID# CK# 272	CARTER PRINTING Co 1739 E. GRAND AVE DES MOINES IA	CAMPAIGN CARDS	450.50
10/21/06	ID# CK# 273	OFFICE MAX 2700 JINGERSOLL DES MOINES, IA	Supplies	69.40
10/23/06	ID# CK# 274	U.S. POSTMASTER 2 ND & UNIVERSITY DES MOINES IA	POSTAGE	480.00
10/25/06	ID# CK# 275	U.S. POSTMASTER 2 ND & UNIVERSITY DES MOINES IA	POSTAGE	999.00
10/30/06	ID# CK# 276	CARTER PRINTING Co 1739 E. GRAND DES MOINES IA	POST CARDS	112.25
SUB-TOTAL				\$4,826.15
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 56.6(3)(i).)

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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.

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT TIM BRIEN

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
10/31/06	ID# CK# 277	IOWA BYSTANDER DES MOINES, IA.	CAMPAIGN AD	\$ 300.00
10/31/06	ID# CK# 278	U.S. POSTMASTER 2 ND & UNIVERSITY DES MOINES IA 50305	POSTAGE	240.00
11/2/06	ID# CK# 279	U.S. POSTMASTER 2 ND & UNIVERSITY DES MOINES IA	POSTAGE	144.00
10/30/06	ID# CK# 280	DES MOINES REGISTER P.O. BOX 957 DES MOINES, IA	CAMPAIGN AD	640.00
11/3/06	ID# CK# 281	U.S. POSTMASTER 2 ND & UNIVERSITY DES MOINES, IA	POSTAGE	492.00
11/13/06	ID# CK# 282	RICK WHITE HAULING DES MOINES, IA	SIGN DISPOSAL	75.00
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,891.00
TOTAL (if last page of this schedule)				\$ 6,717.15

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 56.6(3)(i).)

SCHEDULE F (Rev. 08/96)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT TIM BRIEN

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 10,482.17

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
10/26/02	ELIZABETH A. BRIEN 3919 URBANDALE AVE DES MOINES, IA 50310	MOTHER	\$ 1,000.00

TOTAL (PART I) \$ 1,000.00

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
11/27/06	ELIZABETH A. BRIEN 3919 URBANDALE AVE DES MOINES, IA 50310	MOTHER	\$ 1,000.00
1/5/07	TIM BRIEN 3919 URBANDALE AVE DES MOINES, IA 50310	CANDIDATE	454.55

TOTAL CASH REPAYMENTS (PART II) \$ 1,454.55

From Schedule E -- TOTAL LOANS FORGIVEN \$ 10,027.62

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ - 0 -

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