



# DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	9156
Logged In	SW
Scanned	
Computer	
Audited	

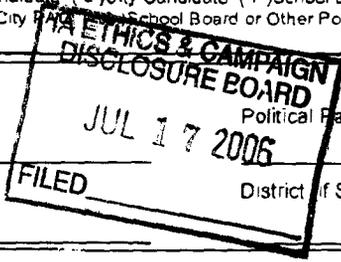
COMMITTEE NAME (Must be same as on Statement of Organization)  
Polk County Republican Central Committee

IMPORTANT: Indicate by # type of committee you are reporting for. 4  
 ( 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.

Ryan R. Anderson 515-226-0612 7/17/06  
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A July 19 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
 (report date) 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 \_\_\_\_\_

County & Local Committees, enter County in which Election is held \_\_\_\_\_

## 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>6,767.12</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		<u>5,983.27</u>
Schedule F: Loans Received total (Attach Schedule F) .....		<u>-</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....		<u>-</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL .....	\$	<u>12,750.39</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....		<u>10,254.49</u>
Schedule F: Loan Repayments total (Attach Schedule F) .....		<u>-</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....	\$	<u>2,495.90</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$	<u>✓</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....	\$	<u>✓</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) .....	\$	<u>✓</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>✓</u>

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

For Instructions, See Back of Form



SCHEDULE <b>A</b> (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)

*Polk County Republican Central 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.

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/YYR)	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
5/23/06	ID# CK# 11400	Hai Higgs 2024 NW 92nd CE Clive, IA 50325	NA	\$ 50	<input type="checkbox"/>
5/24/06	ID# CK# 7713	Becky Beach 4020 John Lynde Rd DSM, IA 50312	NA	150	<input checked="" type="checkbox"/>
4/24/06	ID# CK# 1088	Bob Brownell 5621 131st SE Urbandale, IA 50323	NA	1,000	<input checked="" type="checkbox"/>
5/25/06	ID# CK# 3381	Faith Dorn 9708 Hammontrac Dr Urbandale, IA 50322	NA	500	<input checked="" type="checkbox"/>
5/31/06	ID# CK# 7869	Becky Dorn Stewart 8101 Goodman Dr Urbandale, IA 50322	NA	250.00	<input type="checkbox"/>
6/20/06	ID# CK# 2369	Linda Gibbs & Tim Shupe 14639 Woodcrest Dr Clive, IA 50325	NA	250	<input checked="" type="checkbox"/>
5/31/06	ID# CK# 2041	Mik St. Clair 3203 SW Ct. Ave Ankeny IA 50023	NA	100	<input checked="" type="checkbox"/>
5/31/06	ID# CK#	Glenn Stiel 1795 260th SE Adel, IA 50003	NA	15	<input type="checkbox"/>
6/2/06	ID# CK# 487	Boal for Iowa House 3301 SW Timber Green Rd Ankeny, IA 50021	NA	25.00	<input type="checkbox"/>
6/6/06	ID# CK# 7231	George & Joyce Jont 3204 SW 7. 1302 NE Trilein Dr Ankeny, IA 50021	NA	20.00	<input type="checkbox"/>
SUB-TOTAL				\$2,360	
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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(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)  
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6/6/06	ID# CK# 8920	Bob & Gloria Beinhart 2942 Sioux St DSM IA 50321	NA	\$50.00	<input checked="" type="checkbox"/>
6/6/06	ID# CK# 2340	Matthew McCormick 5144 Robertson Dr DSM IA 50312	NA	40	<input type="checkbox"/>
6/1/06	ID# CK# 10491	Mark Ferguson 9849 Clark St Clive, IA 50225	NA	40	<input type="checkbox"/>
6/1/06	ID# CK# 6875	Valerie Schulte 3803 9th St DSM, IA 50313	NA	40	<input type="checkbox"/>
6/1/06	ID# CK# 7888	Ron Hieston 2104 52nd St DSM, IA 50310	NA	40	<input type="checkbox"/>
6/1/06	ID# CK# 1453	Samuel Bolton 1913 W. 1st & 216 Ankeny, IA 50023	NA	40	<input type="checkbox"/>
6/1/06	ID# CK#	Joy Corning 4323 Grand Ave #324 DSM, IA 50312	NA	40	<input type="checkbox"/>
6/1/06	ID# CK#	Chuck Urrhuel 107 4th St NW Mitchellville, IA 50109	NA	40	<input type="checkbox"/>
6/17/06	ID# C00413245 CK# 1875	Straight Talk for America 211 N. Union St Ste 200 Alexandria, VA 22314	NA	1,000	<input type="checkbox"/>
6/19/06	ID# CK# 4525	Winifred Kelley 3663 Grand Ave #906 DSM, IA 50312	NA	25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1,355	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE <b>A</b> (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)  
*Polk County Republican Central Committee*

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6/20/06	ID# CK# 7466	Karl + Barb Nilsson 1609 Rainbow Dr Cedar Falls, IA 50613	NA	\$ 50	<input type="checkbox"/>
6/20/06	ID# CK# 2253	Don + Marcella Ansky 200 9th St WDM, IA 50265	NA	35	<input type="checkbox"/>
6/20/06	ID# CK# 1086	Leonard Ann Zowh 1362 Hwy 59 Halstein, IA 51025	NA	177	<input type="checkbox"/>
6/20/06	ID# CK# 81717	GWSSC (Reimbursements) 5325 Runi St Denver, CO 80221	NA	936.27	<input type="checkbox"/>
6/20/06	ID# CK# 6637	Rep. Sandy Griesner 1005 Hwy 92 Keota, IA 52248	NA	50	<input type="checkbox"/>
6/20/06	ID# CK# 1187	Rep. Libby Jacobs 808 5th St WDM, IA 50266	NA	150	<input checked="" type="checkbox"/>
6/29/06	ID# CK#	Unitemized Cash	NA	75	<input type="checkbox"/>
6/27/06	ID# CK# 133345	Tina Morgan 617 E. 23rd St N. Newton, IA 50208	NA	25	<input type="checkbox"/>
	ID# CK# 2742	Jay Hine 3612 Ridge Ave Sioux City, IA 51106	NA	25	<input checked="" type="checkbox"/>
	ID# CK# 4029	MIKE COOK 4000 University #1 DSM, IA 50311	NA	25	<input checked="" type="checkbox"/>
SUB-TOTAL				\$1,548.27	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE <b>A</b> (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)

*Polk County Republican Central Committee*

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6/27/06	ID# CK# 3425	David Payer 3125 Crocker DSM, IA 50312	NL	\$ 25	<input type="checkbox"/>
6/27/06	ID# CK# 1006	Keith Luchtel 10521 Sunset Terrace Clive, IA 50325	NL	25	<input checked="" type="checkbox"/>
6/27/06	ID# CK# 4701	Lana Hinderks 2229 Grand Ave # 9 WDM, IA 50265	NL	25	<input checked="" type="checkbox"/>
6/27/06	ID# CK# 720	Steve Roberts 666 Walnut # 2500 DSM, IA 50319	NA	25	<input checked="" type="checkbox"/>
6/27/06	ID# CK# 12025	Kevin McLaughlin 4244 Foster Dr DSM, IA 50312	NA	50	<input checked="" type="checkbox"/>
7/11/06	ID# CK#	Unitemized cash	NA	\$45	<input type="checkbox"/>
7/11/06	ID# CK# 7870	Andrea Hansen 4301 Park Ave #630 DSM, IA 50321	NA	\$25	<input type="checkbox"/>
8/11/06	ID# 2183 CK# <del>403022</del>	The Commonwealth PAC 45 School St, 2nd floor Boston, MA 02108	NA	\$500	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 720	
TOTAL (if last page of this schedule)				\$5,983.27	

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FOR INSTRUCTIONS, SEE BACK OF FORM



SCHEDULE <b>B</b> (Rev. 07/03)	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)  
*Polk County Republican Central 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
6/20/06	ID# CK# 5462	Naal Insurance PO Box 370 Ottumwa, IA 52501	Central Committee Insurance	\$ 402
5/20/06	ID# CK# 5463	Qwest PO Box 91104 Seattle, WA 98111	Phones	59.13
5/20/06	ID# CK# 5464	Holiday Inn 1050 6th Ave Des Moines, IA 50314	Room Rental for central committee mtg	192.13
5/20/06	ID# CK# 5465	RPI 621 E 9th St DSM, IA 50309	Photocopies + postage	364.67
5/20/06	ID# CK# 5466	Embassy Suites 1050 E. Locust Des Moines, IA 50309	Room Rental	94.13
5/20/06	ID# CK# 5467	Capston Consulting 906 SE Kensington Ankeny, IA 50309	reimbursement for hard drive shipping + recovery expenses	223.04
5/26/06	ID# CK# 5468	MacDonald letter shop 1632 Ohio DSM, IA 50310	mailing succ.	1,763.55
5/26/06	ID# CK# 5469	Mac Donald letter shop 1632 Ohio DSM, IA 50310	mailing succ	1447.47
SUB-TOTAL				\$ 4,546.12
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



**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY EXPENDITURES</b>
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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)  
*Polk County Republican Central 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
6/1/06	ID# CK# 5470	Capstone Cons Htg 906 SE Kensington Ames, IA 50309	Cons-Htg Sucs.	\$ 1,250
6/1/06	ID# CK# 5471	Ember Leonard 3115 Story St Ames, IA 50014	cons Htg Sucs	350
6/14/06	ID# CK# 5472	RPI 621 E 9th Desm, IA 50309	Photocopies + postage	70.98
6/14/06	ID# CK# 5473	Hb ldrer Znr 1050 CTS Ave Desm, IA 50314	Room Rental for Central Comm mtg	192.39
6/27/06	ID# CK# 5792	Blank Park Zoo 7401 SW 9th Desm, IA 50315	Blank Park Zoo Deposit	692.50
7/3/06	ID# CK# 5474	Ember Leonard 3115 Story St Ames, IA 50014	Cons-Htg Sucs	642.46
7/3/06	ID# CK# 5475	RPI 621 E 9th Desm, IA 50309	Photocopies + postage	176.28
7/7/06	ID# CK# 5476	Vernon Sales Promotion 1 Promotion Place Newton, IA 50208	Polk Co. pins	313.67
SUB-TOTAL				\$ 3,688.30
TOTAL (if last page of this schedule)				\$

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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



**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
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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)  
*Polk County Republican Central 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
7/3/06	ID# CK# 5477	Capstone Consulting 906 SE Kensington Ankeny, IA 50309	Consulting Sus	\$1,250
6/1/06	ID# CK# Auto	Bankers Trust 665 Locust Des Moines, IA 50309	MO. Acct Fee	5.80
6/1/06	ID# CK# Auto	Best PO Box 91104 Seattle, WA 98114	Phone line instl + deposit	582.75
7/3/06	ID# CK# Auto	Bankers Trust 665 Locust Des Moines, IA 50306	Mo Acct Fee	6.87
7/6/06	ID# CK# 5428	Capstone Consulting 906 SE Kensington Ankeny, IA 50309	Consulting Sus	174.65
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$2,020.07
TOTAL (if last page of this schedule)				\$10,254.49

**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)(j).)

Reset Form

SCHEDULE <b>G</b> (Rev. 02/96)	BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Polk County Republican Central Committee*

**PART II- ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT** (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)

**PART I - NAME AND ADDRESS OF CONSULTANT**

Name of Consultant <i>Ember Leonard</i>			
Mailing Address <i>3115 Story SE</i>			
City <i>Ames</i>	State <i>IA</i>	Zip Code <i>50014</i>	

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From <i>5/1/06</i> To <i>9/30/06</i>	\$ <i>2,500</i>

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
			\$

**ESTIMATES OF PERFORMANCE**

*- Public relations/communications*

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SUB-TOTAL	\$
TOTAL (# last page of this schedule)	\$

Reset Form

SCHEDULE <b>G</b> (Rev. 02/96)	BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT
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**PART II- ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)**

**PART I- NAME AND ADDRESS OF CONSULTANT**

Name of Consultant <i>Rebecca Brandmeyer</i>			
Mailing Address  <i>906 SE Keasington</i>			
City <i>Ankeny</i>	State <i>Ia</i>	Zip Code <i>50309</i>	

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From <i>3/1/06</i> To <i>12/31/06</i>	\$ <i>17,500</i>

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
			\$

**ESTIMATES OF PERFORMANCE**

*- managing/directing media activities*

*- directing fundraising activities*

SUB-TOTAL	\$
TOTAL (if last page of this schedule)	\$