

DISCLOSURE SUMMARY PAGE

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

Ron Frascht

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 _____ Political Party (if applicable) _____

Ron Frascht _____

Office Sought _____ District (if Senate or House) _____

Council Bluffs, City Council _____

Pat Watkinson

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	13674
Logged In _____	
Scanned _____	
Computer _____	JM
Audited _____	

RECEIVED
EMAIL
FEB - 5 2006

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.

712-256-2021

2-9-06

SIGNATURE OF PERSON FILING REPORT**TELEPHONE****DATE SIGNED**

I AM FILING A _____ 2-9-06 _____ 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 **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 _____

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)..... 758.98 _____

Schedule F: Loans Received total (Attach Schedule F) _____

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... _____

(Schedule H applies to Candidates' Committees Only)**SUB-TOTAL** \$ _____**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 758.98 _____

Schedule F: Loan Repayments total (Attach Schedule F) _____

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....

\$ _____ 0 _____

****UNPAID BILLS** (From Schedule D - Attach Schedule D)..... \$ _____****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$ _____****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) \$ _____**CONSULTANT BREAKDOWN** (Schedule G Attached?) _____ YES _____ NO

Pottawattamie

SCHEDULE A MONETARY (Rev. 07/03) RECEIPTS CHECK THIS BOX IF AMENDING FORM	RECEIVED <i>EMAIL</i> FEB - 5 2006
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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME <i>(Must be same as on Statement of Organization)</i>

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 FOR FUNDRAISING INCOME
10/30/05	ID# CK#	Council Bluffs Fire Department		\$500.00	
	ID# CK#				

SUB-TOTAL	\$500.00
TOTAL <i>(if last page of this schedule)</i>	\$500.00

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES	<div style="border: 2px solid black; padding: 10px; display: inline-block;"> <p style="font-size: 24px; margin: 0;">RECEIVED</p> <p style="font-size: 18px; margin: 0;"><i>EMAIL</i></p> <p style="font-size: 20px; margin: 0;">FEB - 5 2006</p> </div>
CHECK THIS BOX IF AMENDING FORM		
COMMITTEE NAME <i>(Must be same as on Statement of Organization)</i>		

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.

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 EXPEN
	ID# CK#	Pottawattamie County Auditor	Precinct Map and Voters	\$70.00
10/8/05	ID# CK#	Office Max	Fliers	33.63
10/27/05	ID# CK#	Office Max	Fliers	40.92
9/21/05	ID# CK#	Design 4	Signs	231.12
11/1/05	ID# CK#	Nonpareil	Ads	383.31
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$758.98
TOTAL (if last page of this schedule)				\$758.98