

Pottawattamie

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT PAULA DANKER

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) Campaign (7) School Board or Other
 Political Subdivision Candidate (8) County Ethics PAC (9) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:
 Candidate Name: **PAULA DANKER** Political Party (If applicable): **REPUBLICAN**
 Office Sought: **POTTAWATTAMIE COUNTY BOARD OF SUPERVISORS** District (If Senate or House):

FORM DR-2 DISCLOSURE REPORT
 (Rev. 12/2005)

For Office Use Only
 Comm # _____
 Logged In _____
 Scanned _____
 Computer _____
 Audited _____

File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th, Ste 1A
 Des Moines, Iowa 50319
 Fax: 515-281-3701

FILED
MAY 18 2006
DISCLOSURE BOARD

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.

Matt Grunert **Treasurer** 712-322-3300 5/18/06
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 5-19-06 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 _____
 County & Local Committees, enter County in which Election is held
POTTAWATTAMIE

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>-0-</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>2,590.-</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>
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	<u>2,590.-</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>809.09</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>1,780.91</u>

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 0
 **IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 0
 **OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 0
 CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES X 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



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)
 COMMITTEE TO ELECT PAULA DANKER

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
4-25-06	ID# CK#	FAYE BUTLER 341 E. WARRING AVE. STATE COLLEGE, PA 16801		\$ 100. -	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	PATTY SMITH 770 KEY CIRCLE CARTER LAKE, IA 51510		50. -	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	HAROLD PETERSON 19244 HAWTHORNE AVE COUNCIL BLUFFS, IA 51503		100. -	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	JOHN JERKOVICH 535 W. BROADWAY COUNCIL BLUFFS, IA 51503		250. -	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	MARK McKEEVER P.O. Box 1827 COUNCIL BLUFFS, IA 51502		200. -	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	VERNE WELCH 17964 BOWT TREE RIDGE COUNCIL BLUFFS, IA 51503		150. -	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	MARY HARRISON 20626 CARDINAL LANE COUNCIL BLUFFS, IA 51503		50. -	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	MATTHEW BRONSTEAL 390 KEELING COUNCIL BLUFFS, IA 51503		50. -	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	DON COATS 12574 DEERFIELD COURT COUNCIL BLUFFS, IA 51503		150. -	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	BRANDY DANKER 132 HIGHCLOVE CIRCLE COUNCIL BLUFFS, IA 51503		50. -	<input checked="" type="checkbox"/>

SUB-TOTAL \$ 1,150. -

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



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)
COMMITTEE TO ELECT PAULA DANKER

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4-27-06	ID# CK#	TOM HANAFAN 104 NORWOOD DR. COUNCIL BLUFFS, IA 51503		\$ 30.-	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	HENRY PETERSEN 34 PICKARD LANE COUNCIL BLUFFS, IA 51501		100.-	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	RON JOHNSON 23252 THREE BRIDGE RD COUNCIL BLUFFS, IA 51503		50.-	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	CAREN TAYLO 1401 AVE E COUNCIL BLUFFS, IA 51501		100.-	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	JASON JAMES 24371 RICHFIELD LOOP COUNCIL BLUFFS, IA 51503		150.-	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	JAMES MALONE 110 TREE TOPS COURT COUNCIL BLUFFS, IA 51503		100.-	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	SHARON STOKES 23833 McPHERSON AVE COUNCIL BLUFFS, IA 51503		30.-	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	TODD LETMAN 940 VALLEY VIEW DR COUNCIL BLUFFS, IA 51503		150.-	<input checked="" type="checkbox"/>
4-27-06	ID# CK#	KATIE TISHER 1116 S. 35th ST COUNCIL BLUFFS, IA 51501		40.-	<input checked="" type="checkbox"/>
4-29-06	ID# CK#	MARY ANN POTRATIS 128 MCKENZIE CIR COUNCIL BLUFFS, IA 51503		35.-	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 785.-

TOTAL (if last page of this schedule)

\$

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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)

COMMITTEE TO ELECT PAULA DANFEL

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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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
5-12-06	ID# CK#	DOUG STRYK 219 CARSON AVE COUNCIL BLUFFS, IA 51503		\$ 50.-	<input type="checkbox"/>
5-12-06	ID# CK#	RONCE DINGES 501 ARNOLD AVE COUNCIL BLUFFS, IA 51503		50.-	<input type="checkbox"/>
5-11-06	ID# CK#	ANNE HANK-SPETMAN 309 FAWN PARK CIR COUNCIL BLUFFS, IA 51503		100.-	<input type="checkbox"/>
	ID# CK#	UNITEMIZED CONTRIBUTIONS		455.-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 655.-

TOTAL (if last page of this schedule)

\$ 2,590.-

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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)
COMMITTEE TO ELECT PAULA DANKER

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4-25-06	ID# CK# 1	DAILY NONPAREIL 535 W BROADWAY COUNCIL BLUFFS, IA 51503	NEWSPAPER ADVERTISING	\$ 99.60
5-3-06	ID# CK# 2	VALENTINOS 1351 MADISON AVE COUNCIL BLUFFS, IA 51503	FOOD FOR FUNDRAISOR	338.49
5-5-06	ID# CK# 3	DAILY NONPAREIL 535 W BROADWAY COUNCIL BLUFFS, IA 51503	NEWSPAPER ADVERTISING	371.-
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 809.09

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).)