

*Scott*

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE**



<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

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

**FRIENDS OF EICCD**

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) \_\_\_\_\_

Office Sought \_\_\_\_\_ District (if Senate or House) \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties.

*[Signature]*  
 SIGNATURE OF PERSON FILING REPORT

563-336-3335  
 TELEPHONE

1/13/06  
 DATE SIGNED

I AM FILING A JANUARY 19, 2006  
 (report date)

REPORT FOR  ELECTION /  NON-ELECTION YEAR.  
 Indicate by #   
**JAN 13 2006**  
 FILED \_\_\_\_\_ FAX \_\_\_\_\_

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.) ..... \$ 880.52

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below) ..... 30.00

Schedule F: Loans Received total (Attach Schedule F) ..... N/A

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... N/A

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** ..... \$ 910.52

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... 606.71

Schedule F: Loan Repayments total (Attach Schedule F)..... N/A

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3) ..... \$ 303.81

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)..... \$ N/A

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... \$ N/A

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... \$ N/A

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)  YES  NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) ..... \$ \_\_\_\_\_

For Instructions, See Back of Form



<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)  
 FRIENDS OF EICCD

**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 FUND-RAISER INCOME
092505	ID# CK#	HOOGHEEM, CINDY 508 PORTLAND AVE MORRISON, IL 61270		\$ 20.00	<input type="checkbox"/>
091605	ID# CK#	PAASCH, KATHY 1911 ROOSEVELT CLINTON, IA 52732		10.00	<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 30.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 30.00	

\* 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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<b>SCHEDULE</b> <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)  
 FRIENDS OF EICCD

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
090705	ID# CK# 1005	US POST OFFICE 933 W 2ND ST DAVENPORT, IA 52801	POSTAGE	\$ 515.31
090905	ID# CK# 1008	BLOUNT, ROBIN 2529 BELLE AVE DAVENPORT, IA 52803	POSTAGE	23.00
091605	ID# CK#	US POST OFFICE	POSTAGE	37.00
092005	ID# CK#	WELLS FARGO 666 WALNUT ST DES MOINES, IA 50309	BANK SERVICE CHG	5.35
092005	ID# CK# 1011	BEDELL, HONEY 23 EDGEHILL TERRACE DAVENPORT, IA 52803	POSTAGE	10.00
102005	ID# CK#	WELLS FARGO 666 WALNUT ST DES MOINES, IA 50309	SERVICE CHARGE	5.35
111805	ID# CK#	WELLS FARGO 666 WALNUT ST DES MOINES, IA 50309	SERVICE CHARGE	5.35
121905	ID# CK#	WELLS FARGO 666 WALNUT ST DES MOINES, IA 50309	SERVICE CHARGE	5.35
SUB-TOTAL				\$ 606.71
<b>TOTAL (If last page of this schedule)</b>				<b>\$ 606.71</b>

**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).)