

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

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

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: Connie Toresdahl Political Party (if applicable): Democrat  
 Office Sought: Story County Treasurer 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. 12<sup>th</sup>, Ste. 1A  
 Des Moines, Iowa 50319  
 Fax: 515-281-3701

IA ETHICS & CAMPAIGN  
 DISCLOSURE BOARD  
 JUL 19 2006  
 FILED FAX

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.

LondeLL F Mannes  
SIGNATURE OF PERSON FILING REPORT

515-232-5205  
TELEPHONE

7-17-06  
DATE SIGNED

I AM FILING A May 15 - July 14, 2006 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  
Story

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>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>3907.30</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>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>3907.30</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>1250.32</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>2656.98</u>
*UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>376.47</u>
*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)	\$	
<b>STATE COMMITTEES:</b> Submit a reconciled campaign account bank statement in January of each year.		

For Instructions, See Back of Form

**Reset Form**

**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

**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/YY)	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
06/01/06	ID# CK#	Doris Foell 1006 Arizona Ave Ames, IA 50014-3611		\$50.00	<input type="checkbox"/>
06/01/06	ID# CK#	Constance Toresdahl 1517 Meadowlane Ave Ames, IA 50010	Self	100.00	<input type="checkbox"/>
06/05/06	ID# CK#	Londell Mannes 1511 Meadowlane Ave Ames, IA 50010		25.00	<input type="checkbox"/>
06/10/06	ID# CK#	Deborah Groene 723 36th St Des Moines, IA 50312		250.00	<input type="checkbox"/>
06/14/06	ID# CK#	Jane Page 324 Lakeview Ct Nevada, IA 50201		25.00	<input type="checkbox"/>
06/17/06	ID# CK#	Stephen Ward 1523 Meadowlane Ave Ames, IA 50010		25.00	<input type="checkbox"/>
06/18/06	ID# CK#	Thomas Weber 430 Lynn Ave Ames, IA 50014		35.00	<input type="checkbox"/>
06/19/06	ID# CK#	Lloyd Dumenil 309 N Franklin Ames, IA 50014		50.00	<input type="checkbox"/>
06/20/06	ID# CK#	Stewart Burger 623 Crystal Ames, IA 50010		50.00	<input type="checkbox"/>
06/20/06	ID# CK#	Johnie Hammond 3431 Ross Rd Ames, IA 50014		50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 660.00

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). 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

**Reset 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)  
Toresdahl for Treasurer

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06/20/06	ID# CK#	Herman Quirnbach 1002 Jarret Circle Ames, IA 50014		\$150.00	<input type="checkbox"/>
06/20/06	ID# CK#	Margaret Schuster 2200 Hamilton Dr #503 Ames, IA 50014-8275		100.00	<input type="checkbox"/>
06/21/06	ID# CK#	Nancy Brooker Bowers 1507 Carroll Ames, IA 50010		25.00	<input type="checkbox"/>
06/21/06	ID# CK#	Carl Tipton 415 Briarwood Pl Ames, IA 50010		25.00	<input type="checkbox"/>
06/25/06	ID# CK#	Katherine Fromm 907 Luna Vista Dr Escondido, CA 92025		100.00	<input type="checkbox"/>
06/25/06	ID# CK#	Arthur Kleespie 12224 US Hwy 65 Zearing, IA 50278		25.00	<input type="checkbox"/>
06/25/06	ID# CK#	May Ann Lundy 4316 Phoenix Ames, IA 50014		25.00	<input type="checkbox"/>
06/25/06	ID# CK#	Selden Spencer 823 Ashwood Dr Huxley, IA 50124		50.00	<input type="checkbox"/>
06/25/06	ID# CK#	Ruth Swenson 2308 Hamilton Dr Ames, IA 50014-8201		25.00	<input type="checkbox"/>
06/27/06	ID# CK#	Marguerite McNabb 1232 Wisconsin Ave Ames, IA 50014		50.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 575.00	
<b>TOTAL (If last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

Reset 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)  
Toresdahl for Treasurer

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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
06/18/06	ID# CK#	Ann Campbell 428 Pearson Ave Ames, IA 50014		\$50.00	<input type="checkbox"/>
06/27/06	ID# CK#	Leslie Osam Pensack 317 S Wilmoth Ave Ames, IA 50014		25.00	<input type="checkbox"/>
06/30/06	ID# CK#	Bonny Callahan 1214 N 4th St Ames, IA 50010		100.00	<input type="checkbox"/>
06/30/06	ID# CK#	Story County Democratic Central Committee c/o Charles Sage Box 1256		500.00	<input type="checkbox"/>
07/14/06	ID# CK#	C. Lynne Bishop 2609 Eisenhower Ave Ames, IA 50010		25.00	<input type="checkbox"/>
07/14/06	ID# CK#	Dustin Cain 617 S Ave Nevada, IA 50201		25.00	<input type="checkbox"/>
07/14/06	ID# CK#	Lloyd Dumenil 309 N Franklin Ames, IA 50010		30.00	<input type="checkbox"/>
07/14/06	ID# CK#	Carolyn Errington 2122 McCarthy Rd Ames, IA 50014		50.00	<input type="checkbox"/>
07/14/06	ID# CK#	Scott Smith 5012 110th ST NE Solon, IA 52333		100.00	<input type="checkbox"/>
	ID# CK#	Unitemized Contributions		100.00	<input type="checkbox"/>

SUB-TOTAL

\$ 1005.00

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form

Reset 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)**  
 Toresdahl for Treasurer

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DATE RECEIVED (MM/DD/YY)	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
06/27/06	ID# CK#	Pass the Hat		\$607.30	<input type="checkbox"/>
06/22/06	ID# C00000885 CK# PC003587	IUPAT - Political Action Together Political Committee 1750 New York Ave NW		1000.00	<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"/>
<b>SUB-TOTAL</b>				\$ 1607.30	
<b>TOTAL (If last page of this schedule)</b>				\$ 3907.30	

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**Reset Form**

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE</b> <b>B</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)  
Toresdahl for Treasurer

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
06/08/06	ID# CK# 1	Sign Pro 619 S Fourth Ames, IA 50010	Set of Car Magnet Signs	\$ 84.53
06/14/06	ID# CK# 1001	City of Roland 202 E Ash Roland, IA 50236	Parade Entry Fee	10.00
06/30/06	ID# CK# 1002	Nevada Parks & Rec 825 15th St Nevada, IA 50201	SCORE Pavilion Rental Fee for Fundraiser	80.00
07/08/06	ID# CK# 1003	Postmaster 525 Kellogg Ames, IA 50010	Postage for Fundraiser invitations	394.74
07/13/06	ID# CK# 1004	Carter Printing 1739 E Grand Ave Des Moines, IA 50316	Fundraiser invitations (1600) Return Envelopes (2000)	349.80
07/13/06	ID# CK# 1005	Constance Toresdahl 1517 Meadowlane Ave Ames, IA 50010	Reimbursement for "Elect Toresdahl" stickers (10,000)	331.25
	ID# CK#			
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 1250.32</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 1250.32</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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Toresdahl for Treasurer

Reset Form

<b>SCHEDULE E</b> (Rev. 08/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
06/08/06	Connie Toresdahl 1517 Meadowlane Ave Ames, IA 50010	Self	Initial Letter mailing supplies	\$ 50.32	<input type="checkbox"/>
06/08/06	Connie Toresdahl 1517 Meadowlane Ave Ames, IA 50010	Self	Candy for Parades	16.93	<input type="checkbox"/>
06/12/06	Tim Schuck		Payment of Bill owed Brinkster	86.30	<input type="checkbox"/>
06/15/06	Jennifer Holmes		4 rolls of stamps	156.00	<input type="checkbox"/>
06/20/06	Connie Toresdahl 1517 Meadowlane Ave Ames, IA 50010	Self	Thank you notes	7.38	<input type="checkbox"/>
06/14/06	Connie Toresdahl 1517 Meadowlane Ave Ames, IA 50010	Self	Copy initial fundraiser letters	5.14	<input type="checkbox"/>
07/02/06	Connie Toresdahl 1517 Meadowlane Ave Ames, IA 50010	Self	Parade Candy	23.45	<input type="checkbox"/>
07/06/06	Connie Toresdahl 1517 Meadowlane Ave Ames, IA 50010	Self	Mailing Dots	21.48	<input type="checkbox"/>
07/06/06	Connie Toresdahl 1517 Meadowlane Ave Ames, IA 50010	Self	Hand write on Name Tags	9.47	<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 376.47	
TOTAL (if last page of this schedule)				\$ 376.47	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.