

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

Anita Rollins for School Board

IMPORTANT: Indicate by # type of committee you are reporting for: 7

(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: *Anita Rollins* Political Party (if applicable): _____
Office Sought: *School Board* 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.

Barbara Thode
SIGNATURE OF PERSON FILING REPORT

515-232-9979
TELEPHONE

6 Sept. 2006
DATE SIGNED

I AM FILING A _____ 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
12 Sept. 2006

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>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1,520.⁰⁰</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>1,520.⁰⁰</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>820.15</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>699.85</u>
*UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>1,857.20</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>7.80</u>
*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES NO	
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0</u>
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.		

For Instructions, See Back of Form



SCHEDULE	MONETARY RECEIPTS
A (Rev. 07/03)	
<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)
Anita Rollins for School Board

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.

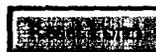
NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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
8/8/06	ID# CK#	Brenda Thorka-Treber 1536 Roosevelt Ave. Ames, IA 50010		\$ 25.00	<input type="checkbox"/>
8/8/06	ID# CK#	Debra Lee 214 S. Maple Ave. Ames, IA 50010		\$ 25.00	<input type="checkbox"/>
8/15/06	ID# CK#	Nancy Knight 1214 Virginia Ave. Ames, IA 50014		\$ 20.00	<input type="checkbox"/>
8/16/06	ID# CK#	Stacy Joiner 1029 Florida Ave. Ames, IA 50014		\$ 10.00	<input type="checkbox"/>
8/16/06	ID# CK#	Ann Thompson 3212 Kiaghon Ames, IA 50014		\$ 500.00	<input type="checkbox"/>
8/16/06	ID# CK#	Eric Harberg 2873 Greensboro Circle Ames, IA 50014		\$ 25.00	<input type="checkbox"/>
8/17/06	ID# CK#	Jane Acker 2107 Graeber Ames, IA 50014		\$ 25.00	<input type="checkbox"/>
8/17/06	ID# CK#	Jayne Samuels 1516 Linden Dr. Ames, Iowa 50010		\$ 25.00	<input type="checkbox"/>
8/17/06	ID# CK#	Jeffrey Johnson 3037 Evergreen Circle Ames, IA 50014		\$ 100.00	<input type="checkbox"/>
8/19/06	ID# CK#	Kathleen Hickok 1710 Buchanan Dr. Ames, IA 50010		\$ 25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 780.00	
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



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)

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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8/20/06	ID# CK#	Eana Clinton 1610 Carroll Ames, IA 50010		\$ 50.00	<input type="checkbox"/>
8/20/06	ID# CK#	Cynthia Jenks 3101 Greenwood Rd. Ames, IA 50014		\$ 10.00	<input type="checkbox"/>
8/20/06	ID# CK#	Kathleen Trahanavsky 2901 Oakland St. Ames, IA 50014		\$ 50.00	<input type="checkbox"/>
8/21/06	ID# CK#	Mary Botine 1002 Vermont Ct. Ames, IA 50010		\$ 25.00	<input type="checkbox"/>
8/21/06	ID# CK#	George Jackson 2801 Greenboro Ames, IA 50010		\$ 100.00	<input type="checkbox"/>
8/22/06	ID# CK#	Carlie Tartakor 826 Hodge Ave. Ames, IA 50010		\$ 100.00	<input type="checkbox"/>
8/22/06	ID# CK#	Janice Beran 304 24th St. Ames, IA 50010		\$ 25.00	<input type="checkbox"/>
8/22/06	ID# CK#	Barbi Greenlaw 3315 Ross Rd. Ames, IA 50014		\$ 20.00	<input type="checkbox"/>
8/21/06	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 380.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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)
Anita Rollins for School Board

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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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
8/24/06	ID# CK#	Jacquelyn Maratt 2926 Monroe Drive Ames, IA 50010		\$ 20. ⁰⁰	<input type="checkbox"/>
8/26/06	ID# CK#	Suzanne Mary Gilber 801 Crystal St. Ames, IA 50010		\$ 25. ⁰⁰	<input type="checkbox"/>
8/27/06	ID# CK#	Allison Tyler 1501 Wheeler Dr. Ames, IA 50010		\$ 25. ⁰⁰	<input type="checkbox"/>
8/29/06	ID# CK#	Lynette Witt 210 Park Dr. Ames, IA 50010		\$ 25. ⁰⁰	<input type="checkbox"/>
8/30/06	ID# CK#	Harold McRabb, Jr. + Marguerite McRabb 1232 Wisconsin Ave. Ames, IA 50014		\$ 50. ⁰⁰	<input type="checkbox"/>
9/1/06	ID# CK#	Carolyn Jones 2916 Forest Hill Ames, IA 50010		\$ 20. ⁰⁰	<input type="checkbox"/>
9/1/06	ID# CK#	Sandra McJimsey 2236 Storm St. Ames, IA 50014		\$ 50. ⁰⁰	<input type="checkbox"/>
9/2/06	ID# CK#	Evie Mylrod 3127 Almond Road Ames, IA 50014		\$ 25. ⁰⁰	<input type="checkbox"/>
9/2/06	ID# CK#	Patricia Leigh 1995 PO Box Ames, IA 50010		\$ 50. ⁰⁰	<input type="checkbox"/>
9/3/06	ID# CK#	Dora James 104 Southwoods Drive Nevada, IA 50201		\$ 20. ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 310. ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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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)
Anita Rollins for School Board

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
9/6/06	ID# CK#	<i>Barbara Wood 2605 Northwestern Ave. Ames, IA 50010</i>		\$ 50. 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"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL
 \$ 50.⁰⁰
TOTAL (if last page of this schedule)
 \$ 1520.⁰⁰

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FOR INSTRUCTIONS, SEE BACK OF FORM



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)
Anita Hollins For School 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 EXPENDED
8/11/06	ID# CK#	<i>Greater IA Credit Union</i>	<i>Opened Saving Account</i>	<i>\$ 5.00</i>
8/25/06	ID# CK#	<i>Shirley Barnes 1119 Curtiss Ave. Ames, IA 50010</i>	<i>Printing of brochures and postcards</i>	<i>\$ 740.15</i>
9/6/06	ID# CK#	<i>Chris Johnson 2319 Jensen Ave. Ames, IA 50010</i>	<i>Website development</i>	<i>\$ 75.00</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 820.15</i>
TOTAL (if last page of this schedule)				<i>\$ 820.15</i>

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)

Anita Rollins for School Board

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YYR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
8/2/06	Anita Rollins 4811 Idaho Circle Ames, IA 50014	Note cards used for invitation + thank you's	\$6.36
8/12/06	Anita Rollins (Same as above)	Printing - flyer	\$13.55
8/12/06	Anita Rollins (Same as above)		\$6.25
8/13/06	Anita Rollins (Same as above)	Stamps - volunteer request letter	\$28.08
8/22/06	Anita Rollins (Same as above)	Stamps	\$7.02
8/22/06	Anita Rollins (Same as above)	⁵⁸ Copies of Brochure	\$43.50
8/22/06	Anita Rollins (Same as above)	Campaign Buttons	\$32.80
SUB-TOTAL			\$137.56
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 2
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Anita Rollins for School Board

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
8/25/06	<i>Anita Rollins 4811 Idaho Circle Ames, IA 50014</i>	<i>100 Yard signs</i>	\$ \$ 323.14
8/28/06	<i>Gary Tartakov 826 Hodge Ave. Ames, IA 50009</i>	<i>Postage Stamps (1750)</i>	\$ 682.50
8/29/06	<i>Gary Tartakov 826 Hodge Ave. Ames, IA 50010</i>	<i>Postage Stamps (200)</i>	\$ 78.00
8/30/06	<i>Anita Rollins 4811 Idaho Circle Ames, IA 50014</i>	<i>Campaign Ad</i>	\$ 78.00
8/31/06	<i>Anita Rollins 4811 Idaho Circle Ames, IA 50014</i>	<i>Campaign Ad</i>	\$ 428.00
9/6/06	<i>Anita Rollins 4811 Idaho Circle Ames, IA 50014</i>	<i>15 Yard Signs</i>	\$ 130.00
SUB-TOTAL			\$ 1,719.64
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1,857.20

*If actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:

"Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Anita Rollins Jr School Board



SCHEDULE E (Rev. 06/97)	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
8/27/06	<i>Carlie Sartakov 826 Hodge Ave. Ames, IA 50010</i>		<i>postal stamps</i>	\$ \$ 7.80	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
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					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 7.80
 TOTAL (if last page of this schedule) \$ 7.80

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