

*J. Keaster*

FOR INSTRUCTIONS, SEE BACK OF FORM

### DISCLOSURE SUMMARY PAGE

Reset Form

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

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

Fert Dodge Future

IMPORTANT: Indicate by # type of committee you are reporting for: 9 11 *mjc 1/15/06*  
 ( 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) \_\_\_\_\_

*JAN 18 2006 PM 1:17:06*

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.

*Margaret J. Conley* 515-576-2932 1/9/06  
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A Jan 1 - Dec 31, 05 REPORT FOR (1) ELECTION // (2) NON-ELECTION YEAR.  
 (report date) Indicate by #  1 *mjc 1/15/06*

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  
3/8/05

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 <b>MUST</b> 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>2600<sup>00</sup></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>
<b>(Schedule H applies to Candidates' Committees Only)</b>		
	SUB-TOTAL .....	\$ <u>2600<sup>00</sup></u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) .....		<u>2600<sup>00</sup></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>0</u>
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D).....	\$	<u>0</u>
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	\$	<u>0</u>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F).....	\$	<u>0</u>
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO	
<b>CANDIDATE COMMITTEES ONLY:</b>		
<b>VALUE OF CAMPAIGN PROPERTY</b> (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



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)  
Fort Dodge Future

**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
03/01/05	ID# CK#	Blair J. Conley 1100 Colonial Dr Fort Dodge IA 50501	None	\$ 200 <sup>00</sup>	<input type="checkbox"/>
03/03/05	ID# CK#	William W Patterson 1260 N 23rd St Ft Dodge IA 50501	—	2000 <sup>00</sup>	<input type="checkbox"/>
03/05/05	ID# CK#	Thomas Hickey 304 2nd Street NW Fort Dodge IA 50501	—	400 <sup>00</sup>	<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				\$ 2600 <sup>00</sup>	
<b>TOTAL (if last page of this schedule)</b>				\$ 2600 <sup>00</sup>	

\* 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

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <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)  
Fort Dodge Future

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
03/03/05	ID# CK# 501	The Messenger 713 Central Ave Fort Dodge IA 50501	Insert in newspaper 3/5 and 3/7 Ads in newspaper 3/7, 3/8	\$ 912 <sup>00</sup>
03/04/05	ID# CK# 502	Three Eagle Communications 200 N 104th St Fort Dodge IA 50501	21 Commercials/ads on KVFD 1400Am	294 <sup>00</sup>
03/04/05	ID# CK# 503	Kwmt - AM 540 Fort Dodge IA 50501	21 Media Spots on 3/5 to 3/6	255 <sup>00</sup>
03/07/05	ID# CK# 504	VIP Choice Printing 1012 - 1st Ave N, PO Box 717 Fort Dodge IA 50501	12,000 Flyers	376 <sup>30</sup>
03/05/05	ID# CK# 505	Kelco Signs 26 North 3rd Street Fort Dodge IA 50501	10 Vote No Signs	208 <sup>87</sup>
03/07/05	ID# CK# 506	Three Eagle Communications 200 N 104th St Fort Dodge IA 50501	Media Buy #2 - more media spots	500 <sup>00</sup>
12/20/05	ID# CK# 507	Trophy Unlimited 923 Central Ave Fort Dodge IA 50501	Plaque for Mayor Peterson from FD Future	536 <sup>66</sup>
	ID# CK#			
SUB-TOTAL				\$ 2600 <sup>00</sup>
TOTAL (if last page of this schedule)				\$ 2600 <sup>00</sup>

**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).)