

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>6033</u>	
Logged In <u>KW</u>	
Scanned _____	
Computer _____	
Audited _____	

COMMITTEE NAME (Must be same as on Statement of Organization)
 Employers Mutual Casualty Co. Political Action Comm. for Responsible State Govt

IMPORTANT: Indicate by # type of committee you are reporting for: 2
 (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 for District (if Senate or House) _____

Late reports are subject to possible civil and criminal penalties.

Ronald B. Kelley
SIGNATURE OF PERSON FILING REPORT

515-280-2950
TELEPHONE

July 1, 2005
DATE SIGNED

I AM FILING A July 19, 2005 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 _____

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.)	\$ 4,112.82
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	3,119.94
Schedule F: Loans Received total (Attach Schedule F)	0
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL	\$ 7,232.76
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....	1,050.00
Schedule F: Loan Repayments total (Attach Schedule F)	0
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 6,182.76
**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
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	<input type="checkbox"/> YES <input type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ _____

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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)
Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov

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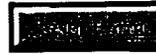
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# GK#	Ron Herman 1209 Benwood Ct Altoona, IA 8 x \$2.50 = \$20.00		\$	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$3.25 = \$13.00		33.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Greg Christianson 7819 Hwy 5 52 N Baxter, IA 50028 8 x \$3.25 = \$26.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$3.25 = \$13.00		39.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Tim Wylder 8512 Horton Ave Des Moines, IA 8 x \$2.31 = \$18.48			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$3.50 = \$14.00		32.48	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	Jerry Richards 1301 Merle Hay Rd Des Moines, IA 4 x \$5.00 = \$20.00		20.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Scott Behrens 416 Grand Ave West Des Moines, IA 50265 8 x \$2.40 = \$19.20			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$1.50 = \$6.00		25.20	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL
\$ 149.68

TOTAL (if last page of this schedule)
\$

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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) Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov
--

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1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK#	Heather Boustead 7618 Madison Ave Des Moines, IA 8 x \$3.50 = \$28.00		\$	<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" " 4 x \$3.25 = \$13.00		41.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK#	James Dawson 9017 Ridgeview Dr Johnston, IA 50131 8 x \$2.50 = \$20.00			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" " 4 x \$2.50 = \$10.00		30.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK#	David Grzeskowiec 4400 Park Ave., #16 Des Moines, IA 50321 8 x \$2.50 = \$20.00			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" " 4 x \$2.50 = 10.00		30.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK#	Martin Reed 737 E Walnut, #29 Elkhart, IA 50073 8 x \$4.00 = \$32.00			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" " 4 x \$4.00 = \$16.00		48.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK#	Adam Rourke 386 215 Ave Hartford, IA 50118 8 x \$2.50 = \$20.00			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" " 4 x \$2.00 = \$8.00		28.00	<input type="checkbox"/>
SUB-TOTAL				\$177.00	
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)
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5/6, 5/20 6/3, 6/17/05	ID# 05 CK#	Scott Butler 100 30th St Des Moines, IA 50312 4 x \$4.00 =		\$ 16.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# 05 CK#	Denise Mernka 4328 New York Ave Des Moines, IA 50310 8 x \$2.00 = \$16.00			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# 05 CK#	" " 4 x \$1.75 = \$7.00		23.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# 05 CK#	Bob Morlan 3404 Wakonda Ct Des Moines, IA 50321 8 x \$15.38 = \$123.04			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# 05 CK#	" " 4 x \$20.00 = \$80.00		203.04	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# 05 CK#	Joe Smith 6885 Sharon Dr Urbandale, IA 50322 8 x \$5.00 = \$40.00			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# 05 CK#	" " 4 x \$4.62 = \$18.48		58.48	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# 05 CK#	Deana Clark P. O. Box 248 Monroe, IA 50170 8 x \$3.25 = 26.00			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# 05 CK#	" " 4 x \$3.25 = \$13.00		39.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 339.52	
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)
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1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Ken Cumpston 1900 NW 152nd St Clive, IA 50325 8 x \$2.50 = \$20.00		\$	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$2.75 = \$11.00		31.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Dave Hixenbaugh 4903 Lakewood Dr Norwalk, IA 50211 8 x \$3.25 = \$26.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$3.25 = \$13.00		39.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Mike Bloomberg 4638 Elm West Des Moines, IA 50265 8 x \$1.50 = \$12.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$1.50 = \$6.00		18.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Ron Hallenbeck 5880 Brentwood Johnston, IA 8 x \$4.00 = \$32.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$5.00 = \$20.00		52.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Doug Nuehring 14430 Bryn Mawr Urbandale, IA 50323 8 x \$2.00 = \$16.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$2.00 = \$8.00		24.00	<input type="checkbox"/>
SUB-TOTAL				\$ 164.00	
TOTAL (if last page of this schedule)				\$	

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
 Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Chris Hatchitt 1315 HyVue St Adel, IA 50003 8 x \$4.00 = \$32.00		\$	<input type="checkbox"/>
5/6/05	ID# CK#	" " 1 x \$4.00 = \$4.00		36.00	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	Jason Hughes 905 Shawver Dr Grimes, IA 50111 4 x \$3.25 =		13.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Curtis Husske 300 Baldwin St Maxwell, IA 50161 8 x \$1.92 = \$15.36			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$1.92 = \$7.68		23.04	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Nick Kolacia 8817 Hickman Rd., Apt. 704 Urbandale, IA 50322 8 x \$10.00 = \$80.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$10.00 = \$40.00		120.00	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	Allan Pauley 407 Hartford Des Moines, IA 4 x \$1.92 =		7.68	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	John Power 217 Elm Ave Story City, IA 8 x \$5.00 = \$40.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$5.00 = \$20.00		60.00	<input type="checkbox"/>
SUB-TOTAL				\$ 259.72	
TOTAL (if last page of this schedule)				\$	

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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)
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1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK# 05	Georgia Rhoades 3633 Cornell Des Moines, IA 50313		\$ 8 x \$10.00 = \$80.00	<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" "		122.00 4 x \$10.50 = \$42.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK# 05	Robert Greedy 1104 Clark Ames, IA 50010		8 x \$2.50 = \$20.00	<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" "		30.00 4 x \$2.50 = \$10.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK# 05	Nathan Habben 210 S Prairie View Dr., Apt 837 West Des Moines, IA		8 x \$3.75 = \$30.00	<input type="checkbox"/>
5/6, 5/20 6/2, 6/17/05	ID# CK#	" "		46.00 4 x \$4.00 = \$16.00	<input type="checkbox"/>
5/6, 5/20 6/3/6/17/05	ID# CK#	Mike McGinn 2621 NW Heritage Ave Ankeny, IA 50021		4 x \$2.50 =	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK# 05	Mike Freel 4213 E Euclid Des Moines, IA		8 x \$3.25 = \$26.00	<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" "		39.00 4 x \$3.25 = 13.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 247.00	
TOTAL (if last page of this schedule)				\$	

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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) Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov
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1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Monte Ball 304 41st St Des Moines, IA 8 x \$5.00 = \$40.00		\$	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CR#	" " 4 x \$5.00 = \$20.00		60.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Mark McColley 8901 Boston Ave Urbandale, IA 50322 8 x \$3.20 = \$25.60			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CR#	" " 4 x \$2.80 = \$11.20		36.80	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Herb Suffel 990 3rd Waukee, IA 50263 8 x \$3.75 = \$30.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CR#	" " 4 x \$3.75 = \$15.00		45.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Rob Friedman 9390 Lakewood Circle Norwalk, IA 50211 8 x \$3.84 = \$30.72			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CR#	" " 4 x \$4.00 = \$16.00		46.72	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Carole Hallenbeck 5880 Brentwood Johnston, IA 8 x \$2.00 = \$16.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CR#	" " 4 x \$3.25 = 13.00		29.00	<input type="checkbox"/>
SUB-TOTAL				\$ 217.52	
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)
 Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov

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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
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Beech Turner 1904 75th St Des Moines, IA 50322 8 x \$2.50 = \$20.00		\$	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$2.50 = \$10.00		30.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Sharon Gentsch 408 Lacona Des Moines, IA 50315 8 x \$1.25 = \$10.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$1.25 = \$5.00		15.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Leann Goebel 2608 68th St Urbandale, IA 50322 8 x \$1.00 = \$8.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$1.00 = \$4.00		12.00	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	Joan Bolin 3419 St. Johns Rd Des Moines, IA 50312 4 x \$5.00 =		20.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Joe Burkle 14421 Bryn Mawr Urbandale, IA 50323 8 x \$3.34 = \$26.72			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$4.00 = \$16.00		42.72	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 119.72	
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)
 Employers Mutual Casualty Co. Political Action Comm for Responsible State Govt

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1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK#	Ron Paine 10577 Elmcrest Dr West Des Moines, IA 50325 8 x \$3.75 = \$30.00		\$	<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" " 4 x \$3.75 = \$15.00		45.00	<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	Dennis Ryan 3207 E 42nd St Ct Des Moines, IA 50317 4 x \$3.25 =		13.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK#	Alison Cate 6709 Compton Ct Johnston, IA 50131 8 x \$1.00 = \$8.00			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" " 4 x \$1.00 = \$4.00		12.00	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK#	Ray Davis 12926 Timberline Dr Urbandale, IA 50323 8 x \$3.27 = \$26.16			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" " 4 x \$3.27 = \$13.08		39.24	<input type="checkbox"/>
1/14, 1/28 2/11, 2/25 3/11, 3/25 4/8, 4/22/05	ID# CK#	Kevin Hovick 13560 Lake Shore Dr Clive, IA 50325 8 x \$2.50 = \$20.00			<input type="checkbox"/>
5/6, 5/20 6/3, 6/17/05	ID# CK#	" " 4 x \$2.50 = \$10.00		30.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 139.24	
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)

Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov

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1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Ron Jean 2214 Ridgewood Dr Altoona, IA 8 x \$5.50 = \$44.00		\$	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$6.00 = 24.00		68.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Bruce Kelley 14 Glenview Dr Des Moines, IA 50312 8 x \$19.23 = \$153.84			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$6.16 = \$24.64		178.48	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	William Murray 1770 Birchwood Circle Waukee, IA 50263 8 x \$3.25 = \$26.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$3.25 = 13.00		39.00	<input type="checkbox"/>
01/14, 1/28, 2/11, 2/25, 3/11/05	ID# CK#	David Narigon P. O. Box 308 Monroe, IA 50170 5 x \$20.00 =		100.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Mark Reese 4765 NW Lovington Dr Des Moines, IA 50310 8 x \$4.61 = \$36.88			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	" " 4 x \$3.25 = \$13.00		49.88	<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# CK#	Sarah Bartholomew 2007 39th St Des Moines, IA 50310 4 x \$4.00 =		16.00	<input type="checkbox"/>
SUB-TOTAL				\$451.36	
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)
Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov

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5/6, 5/20, 6/3, 6/17/05	ID# 05 CK#	Jerry McClelland 9609 Tanglewood Dr Urbandale, IA 4 x \$3.50 =		\$ 14.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# 05 CK#	Dennis Christy 1801 NW 81st St Clive, IA 50325 8 x \$3.25 = 26.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# 05 CK#	" "		39.00	<input type="checkbox"/>
		4 x \$3.25 = \$13.00			
5/6, 5/20, 6/3, 6/17/05	ID# 05 CK#	John Schumacher 4718 93rd St Urbandale, IA 50322 4 x \$3.25 =		13.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# 05 CK#	Bob Neswold 187 52nd St West Des Moines, IA 50265 8 x \$3.23 = \$25.84			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# 05 CK#	" "		32.32	<input type="checkbox"/>
		4 x \$1.62 = \$6.48			
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# 05 CK#	Jim Fontanini 929 43rd St West Des Moines, IA 50265 8 x \$6.00 = \$48.00			<input type="checkbox"/>
5/6, 5/20, 6/3, 6/17/05	ID# 05 CK#	" "		74.00	<input type="checkbox"/>
		4 x \$6.50 = 26.00			
5/20, 6/3, 6/17/05	ID# 05 CK#	Cynthia Lindaman 810 NW Logan St Ankeny, IA 50021 3 x \$2.50 =		7.50	<input type="checkbox"/>
5/20, 6/3, 6/17/05	ID# 05 CK#	Pam Heilskov 1006 SE Michael Dr Ankeny, IA 50021 3 x \$2.40 =		7.20	<input type="checkbox"/>
SUB-TOTAL				\$ 187.02	
TOTAL (if last page of this schedule)				\$	

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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) Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov
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1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Mike Hanback 4212 Adams Des Moines, IA 50310 8 x \$3.25 = \$26.00		\$	<input type="checkbox"/>
5/20, 6/3, 6/17/05	ID# CK#	" " 3 x \$3.25 = \$9.75		35.75	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Kathleen Knutsen 2500 Ashworth Rd West Des Moines, IA 50265 8 x \$3.25 = \$26.00			<input type="checkbox"/>
5/20, 6/3, 6/17/05	ID# CK#	" " 3 x \$5.00 = \$15.00		41.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Jean Bloomburg 4638 Elm West Des Moines, IA 50265 8 x \$6.00 = \$48.00			<input type="checkbox"/>
5/20, 6/3, 6/17/05	ID# CK#	" " 3 x \$4.00 = \$12.00		60.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Debra Cunningham 1804 57th St Des Moines, IA 50310 8 x \$3.25 = \$26.00			<input type="checkbox"/>
5/20, 6/3, 6/17/05	ID# CK#	" " 3 x \$3.25 = \$9.75		35.75	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Lonnie Schwab P. O. Box 475 Waukee, IA 50263 8 x \$3.50 =		28.00	<input type="checkbox"/>
1/14, 1/28, 2/11, 2/25, 3/11, 3/25, 4/8, 4/22/05	ID# CK#	Shari Scoonover 1443 NW 104th Clive, IA 50325 8 x \$1.50 =		12.00	<input type="checkbox"/>
SUB-TOTAL				\$ 212.50	
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)

Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov

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	ID# CK#	Mark Ferner 4753 85th St Urbandale, IA 50322 8 x \$3.25 =		\$ 26.00	<input type="checkbox"/>
04-26-05	ID# CK#	Bob Link 214 NE 64th St Des Moines, IA 50327-9125		67.50	<input type="checkbox"/>
04-26-05	ID# CK#	Ellen Moore 2389 Lakeview Dr Greenfield, IA 50849		12.50	<input type="checkbox"/>
04-25-05	ID# CK#	Ross Sales 724 46th St West Des Moines, IA 50265		37.50	<input type="checkbox"/>
04-29-05	ID# CK#	Don Klemme 3908 Muskogee Ave Des Moines, IA 50312		208.00	<input type="checkbox"/>
05-24-05	ID# CK#	Joel Oswald 1214 Main St Manson, IA 50563		50.00	<input type="checkbox"/>
05-05-05	ID# CK#	Randy Dickey 15427 Winston Ave Urbandale, IA 50323		15.00	<input type="checkbox"/>
	ID# CK#	Sean Pelletier 13927 Bryn Mawr Dr Urbandale, IA 50323 8 x \$3.27 = \$26.16			<input type="checkbox"/>
	ID# CK#	" " 4 x \$3.25 = \$13.00		39.16	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 455.66	
TOTAL (if last page of this schedule)				\$ 3,119.94	

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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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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)
Employers Mutual Casualty Co. Political Action Comm. for Responsible State Govt.

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
05-05-05	ID#17331 CK#1048	Connolly for Supervisor Committee 111 Court Ave Des Moines, IA 50309	Campaign Contribution	\$ 100.00
06-03-05	ID# 1088 CK# 1049	Jenkins for House Campaign 1540 W Ridgeway Waterloo, IA 50701	Campaign Contribution	100.00
06-03-05	ID# 1114 CK# 1050	Hoffman for Iowa House 8695 S 5th St Charter Oak, IA 51439	Campaign Contribution	100.00
06-03-05	ID# 1088 CK# 1051	Horbach for House of Representatives 1014 Oakland Dr Tama, IA 52339	Campaign Contribution	100.00
06-15-05	ID# CK#1052	House Truman Fund 5661 Fleur Dr Des Moines, IA 50321	Campaign Contribution	100.00
06-15-05	ID# 997 CK# 1053	Friends for Dix P. O. Box 613 Waverly, IA 50677	Campaign Contribution	250.00
06-20-05	ID# 870 CK# 1054	Warnstadt for Senate Committee 3301 Chambers St Sioux City, IA 51104	Campaign Contribution	100.00
06-20-05	ID# 315 CK# 1055	Wise Voters 503 Grand Ave Keokuk, IA 52632	Campaign Contribution	100.00
SUB-TOTAL				\$ 950.00
TOTAL (if last page of this schedule)				\$

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



EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

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

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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
06-20-05	ID# 1206 CK# 1056	Petersen for State Representative 4300 Beaver Hills Dr Des Moines, IA 50310	Campaign Contribution	\$ 100.00
	ID# CK#			
SUB-TOTAL				\$ 100.00
TOTAL (if last page of this schedule)				\$ 1,050.00

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