

**DISCLOSURE SUMMARY PAGE**

<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1416
Logged In	
Scanned	
Computer	WRS
Audited	10-10-06

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

**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: DOUG STRUYK Political Party (if applicable): Republican  
 Office Sought: IOWA HOUSE OF REPRESENTATIVES District (if Senate or House): 99

SEP 15 2006  
 HD  
 FILED

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidates, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

MURRAY HAWK (712) 322-1925 1/16/06  
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A December 31, 2005 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
 (report date) Indicate by #  1

CHECK IF AMENDMENT TO REPORT DATED 12/31/05  
 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.) .....	\$	<u>8054.21</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		<u>25,650.00</u>
Schedule F: Loans Received total (Attach Schedule F) .....		_____
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....		_____
<u>(Schedule H applies to Candidates' Committees Only)</u>		
<b>SUB-TOTAL</b> .....	\$	<u>33,704.21</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) .....		<u>7824.41</u>
Schedule F: Loan Repayments total (Attach Schedule F) .....		_____
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....	\$	<u>25,879.80</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$	_____
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....	\$	<u>526.87</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) .....	\$	_____
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES	NO
<b>CANDIDATE COMMITTEES ONLY:</b>		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>911.00</u>

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

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

CITIZENS FOR STRUYK

Rec'd Form

SCHEDULE <b>H</b> (Rev. 07/03)	CAMPAIGN PROPERTY
ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.	
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

**PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY \*\***

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
8/11/05	Computer and office equipment	1391.00	891.00

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 891.00

\*\* PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ \_\_\_\_\_ TOTALS \$ \_\_\_\_\_ \$ \_\_\_\_\_

\* If estimated, show est. beside figure.

(Attach Additional Schedules if Needed)

# DISCLOSURE SUMMARY PAGE



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<b>For Office Use Only</b>	
Comm. #	1416
Logged in	SW
Scanned	
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Audited	

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

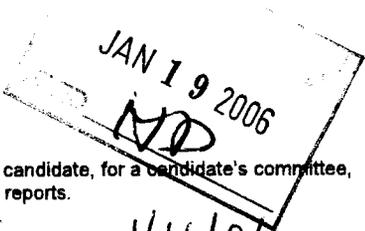
Citizens For Struyk

**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: Doug Struyk Political Party (if applicable): Republican

Office Sought: Iowa House of Representatives District (if Senate or House): 99



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.

Mimi Hawk (712)322-1925 1/16/06

**SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED**

I AM FILING A December 31, 2005 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by #  2

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.) .....\$ 8054.21

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)..... 25,650.00

Schedule F: Loans Received total (Attach Schedule F) .....

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

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** .....\$ 33,704.21

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

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

Schedule F: Loan Repayments total (Attach Schedule F) .....

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....\$ 25,879.80

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\*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ 526.87

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) .....

**CONSULTANT BREAKDOWN** (Schedule G Attached?) \_\_\_\_\_ YES \_\_\_\_\_ NO

**CANDIDATE COMMITTEES ONLY:**

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

**STATE COMMITTEES:** 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)  
 CITIZENS FOR STRUYK

**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
1/5/05	ID# 6107 CK# 3454	QWEST PAC 925 High Street, 959 Des Moines, IA 50309		\$ 500.	<input type="checkbox"/>
1/5/05	ID# 6113 CK# 003045	AFSCME/IOWA COUNCIL 61 4320 NW 2nd Ave Des Moines, IA 50313		200.	<input type="checkbox"/>
1/8/05	ID# 8384 CK# 506	Smithfield Foods Inc, PAC 499 Park Ave, 5th Floor New York, NY 10022		200.	<input type="checkbox"/>
6/21/05	ID# 6027 CK# 2294	Deere PAC IOWA #6027 666 Grand Avenue Des Moines, IA 50309		500.	<input type="checkbox"/>
7/13/05	ID# CK#	Craig H. Neilsen 8620 Titleist Circle Las Vegas, Nevada 89117		400.	<input type="checkbox"/>
7/20/05	ID# CK#	Dr. Eldon R. Everhardt 906 6th St Havlan, IA 51537		25.	<input checked="" type="checkbox"/>
7/25/05	ID# CK#	Jeff Wendel 601 SE 10th St Ankeny, IA 50021		25.	<input checked="" type="checkbox"/>
8/4/05	ID# CK#	K. R. Andresen 1102 SE Michael Drive Ankeny, IA 50021		25.	<input checked="" type="checkbox"/>
8/9/05	ID# CK#	Douglas Snook 490 - 30th St. SE Waverly, IA 50677		50.	<input checked="" type="checkbox"/>
8/11/05	ID# CK#	Michael Grooms 3404 SE 8th St Des Moines, IA 50315		100.	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 2025.	
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 <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)

CITIZENS FOR STRUYK

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
8/17/05	ID# 8028 CK# 1929	Monsanto Citizenship Fund 800 N Lindbergh Blvd St. LOUIS, MO 63167		\$ 500.	<input type="checkbox"/>
8/26/05	ID# CK#	Glenn Grove 15279 Pinecrest Drive CO Bluffs, IA 51503		50.	<input type="checkbox"/>
8/26/05	ID# CK#	Kenneth Petersen 242 Warren St CO Bluffs, IA 51503		50.	<input type="checkbox"/>
8/29/05	ID# CK#	Rod Aylcox 204 Leadenhall Way Alpharetta, GA 30022		1000.	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
9/7/05	ID# 6067 CK# 3329	Iowa Health PAC 6750 Westown Pkwy #100 W Des Moines, IA 50266		250.	<input checked="" type="checkbox"/>
9/7/05	ID# CK#	Mark Anderson 7835 N 54th Ave Omaha, NE 68152		200.	<input checked="" type="checkbox"/>
9/7/05	ID# CK#	Barry Miller 1534 Organ Circle CO Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
9/7/05	ID# CK#	Steven Ackerson 1634 NW 131st St. Clive, IA 50325		100.	<input checked="" type="checkbox"/>
9/11/05	ID# 6486 CK# 1522	Iowa Telecom PAC 115 S 2nd Ave W Newton, Iowa 50208		250.	<input type="checkbox"/>
SUB-TOTAL				\$2450	
TOTAL (if last page of this schedule)				\$	

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<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)  
*CITIZENS FOR STRUYK*

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9/30/05	ID# CK#	James Myers 6600 Westown Parkway W Des Moines, IA 50322		\$ 1000.	<input type="checkbox"/>
9/30/05	ID# CK#	Michael P. Medved 6600 Westown Parkway W Des Moines, IA 50322		1000.	<input type="checkbox"/>
10/3/05	ID# 6098 CK# 3429	Iowa BEV PAC 321 E Walnut - Ste 310 Des Moines, IA 50309		300.	<input type="checkbox"/>
10/7/05	ID# 6059 CK# 2705	Iowa Committee of Automotive Retailers 1111 Office Park Rd, W Des Moines		200.	<input type="checkbox"/>
10/14/05	ID# CK#	Calvin Craib 18 Kate Court Ramsen, NJ 07446-2250		200.	<input type="checkbox"/>
10/11/05	ID# CK#	Fred Haskins 505 5th St, Ste 729 Des Moines, IA 50309		25	<input type="checkbox"/>
10/14/05	ID# CK#	Craig Patterson 809 Little Beaver Drive Grimes, Iowa 50111		50.	<input type="checkbox"/>
10/14/05	ID# CK#	Verne Welch 17964 Bent Tree Ridge Council Bluffs, IA 51503		150.	<input checked="" type="checkbox"/>
10/14/05	ID# 6027 CK# 2322	Deere PAC Iowa 666 Grand Ave, Ste 1707 Des Moines, IA 50309		500.	<input checked="" type="checkbox"/>
10/14/05	ID# 6099 CK# 0805	Meredith Corporation 1716 Locust St Des Moines, IA 50309		150.	<input checked="" type="checkbox"/>
SUB-TOTAL				\$3575.	
TOTAL (if last page of this schedule)				\$	

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<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)**  
*CITIZENS FOR STRUYK*

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10/20/05	ID# 9698 CK# 508	IA ASSOC. of mortgage Brokcrs 2973 100th St Urbandale, IA 50322		\$ 100.	<input checked="" type="checkbox"/>
10/20/05	ID# 6052 CK# 2935	Independent Insurance Agents of Iowa - PAC 4000 Westown Pkwy, Ste 200 West Des Moines, IA 50265		200.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	Arvind Pandikar 2738 28th Ave Marion, IA 52302		100.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	Julie Smith 3917 Hillcrest Drive Des Moines, IA 50310		100.	<input checked="" type="checkbox"/>
10/20/05	ID# 9675 CK# 1060	DAAI PAC 3101 SW 61st St Des Moines, IA 50321		150.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	Mona Bond 2318 W 1st St Ankeny, IA 50021		100.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	Susan Judkins 101 2nd Ave #507 Des Moines, IA 50309		20.	<input checked="" type="checkbox"/>
10/20/05	ID# 6237 CK# 1779	ABATE PAC 3118 Eastern Ave, NE Cedar Rapids, IA 52402		100.	<input checked="" type="checkbox"/>
10/20/05	ID# 6107 CK# 3489	QWEST PAC 425 High St Des Moines, IA 50309		1000.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	Jeffrey Schmitt 1103 Kennedy St Granger, IA 50109		50.	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1920.	
TOTAL (if last page of this schedule)				\$	

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<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)**  
 CITIZENS FOR STRUYK

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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
10/20/05	ID# CK#	Eldon McAfee 300 School Street Des Moines, IA 50311		\$ 100.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	Steve Kerns 3354 140th St Clearfield, IA 50840		50.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	Dave Nelson 1141 Page Ave Belmond, IA 50421		50.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	Troy Skinner 880 Walnut Ridge Drive Waukee, IA 50263		50.	<input checked="" type="checkbox"/>
10/20/05	ID# 6021 CK# 1902	Credit Union PAC 3737 Westown Pkway W Des Moines, IA 50266		200.	<input checked="" type="checkbox"/>
10/20/05	ID# 6058 CK# 2698	Iowa Chiropractic Society 1605 N Ankeny Blvd, Ste 100 Ankeny, IA 50021		100.	<input checked="" type="checkbox"/>
10/20/05	ID# 6101 CK# 3144	Motor Carriers PAC PO Box 6121, E Des Moines Stn. Des Moines, IA 50309		300.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	Beth Clark 1816 River Oaks Drive Des Moines, IA 50312		250.	<input checked="" type="checkbox"/>
10/20/05	ID# 6250 CK# 2289	Iowa Cable PAC 8350 Hickman Rd, Ste 2 Clive, IA 50325		500.	<input checked="" type="checkbox"/>
10/20/05	ID# 6001 CK# 4570000020	Allied Group Farmland 1100 Laurel St Rd Des Moines, IA 50391		250.	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1850.	
TOTAL (if last page of this schedule)				\$	

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<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)

CITIZENS FOR STRUYK

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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
10/20/05	ID# 6033 CK# 1070	EMC CO PAC 717 Mulberry St. Des Moines, IA 50309		\$ 100.	<input checked="" type="checkbox"/>
10/20/05	ID# CK#	George Sherman 2 Merilane Edina, MN 55436		250.	<input checked="" type="checkbox"/>
10/24/05	ID# 6125 CK# 002504	IOWA REALTORS PAC 1370 NW 114 St #100 CLIVE, IA 50325		3000	<input type="checkbox"/>
10/28/05	ID# 6118 CK# 2245	IOWA OPTOMETRIC ASSOC-PAC 1454-30 St, Ste 204 W Des Moines, IA 50266		200.	<input type="checkbox"/>
10/28/05	ID# 6087 CK# 1419	IOWA TELCOM INDUSTRY PAC 2987 100th St, Urbandale, IA 50322		400.	<input type="checkbox"/>
10/29/05	ID# 6046 CK# 4039	JUSTICE FOR ALL PAC 218 6th Ave, Ste 526 Des Moines, IA 50309		100.	<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				\$ 4050.	
TOTAL (if last page of this schedule)				\$	

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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)**  
 Citizens For Struyk

**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
10/20/05	ID# 6070 CK# 3229	IOWA LUWPAC 521 E LOLUST, 3rd Floor DES MOINES, IA 50309		\$ 500.	<input type="checkbox"/>
11/8/05	ID# C00239947 CK# 2075	HARRAH'S ENTERTAINMENT, INC IMPACTS PUBLIC POLICY ONE HARRAH'S CT. LAS VEGAS, NV 89119		500.	<input type="checkbox"/>
11/10/05	ID# CK#	Debra Danielsen 332 Willow CO BLUFFS, IA 51503		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Thomas Johnson PO BOX 541 TREYNOR, IA 51575		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Larry Winum 56250 221st St. Glenwood, IA 51534		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Frank Pechalek 17783 Vista Lane CO BLUFFS, IA 51503		100.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Donald Kohler 610 Eagle Circle Underwood, IA 51576		25.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Donald Kearney 23963 410th St. Oakland, IA 51560		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Rebecca Burgart 145 Ashland St. CO BLUFFS, IA 51503		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Richard Graeme 1011 Arbor Ridge Circle CO BLUFFS, IA 51503		50.	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1425.	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)**  
 CITIZENS FOR STRUYK

**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
11/10/05	ID# CK#	Martha Bell 2000 Chestnut Atlantic, IA 50022		\$ 50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Mark Rater 412 Oakland Ave Co Bluffs, IA 51503		100.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	John Nelson 344 Kenmore Co Bluffs, IA 51503		100.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Jo Kossow 119 Fenwick Circle Co Bluffs, IA 51503		25.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Julia Doll 24 Westlake Village Co Bluffs, IA 51501		200.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Chad Primmer 17561 Turnberry Ridge Co Bluffs, IA 51503		250.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Rita Sealock 1011 Simms Co. Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Bonnie Miley 1733 Fair Oaks Blvd Co Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	William Ballenger 240 Locust Lodge Co. Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Matthew Walsh 1514 Skyline Drive Co Bluffs, IA 51503		100.	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 975.	
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)

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

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

Citizens For Struyk

**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
11/10/05	ID# CK#	Matthew Eide 329 - 43rd St Des Moines, IA 50312		\$ 125.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Jeff Ballenger 12626 Greystone Ct Co Bluffs, IA 51503		100.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Richard Christie 233 Turley Ave Co Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Gary Woods 12 Westlake Village Co Bluffs, IA 51501		100.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Ron TeKippe 5 Horizon Drive Co Bluffs, IA 51503		100.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Robert Exley 109 Red Bud Lane Co Bluffs, IA 51503		30.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Carol Huffman 217 W. Ferndale Co Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	John Coffelt 24339 Richfield Loop Co Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Donna Barry 211 N First Ave Logan, IA 51546		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Margaret Payne 61 Horizon Drive Co Bluffs, IA 51503		25.	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 680.	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
 CITIZENS FOR STRUYK

**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
11/10/05	ID# CK#	Scott Belt 1447 Madison Ave CO Bluffs, IA 51503		\$200	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Thomas Whitson 27597 HWY 6 McClelland, IA 51548		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Brent Siegrist 204 Lori Lane CO Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
11/10/05	ID# CK#	Scott Doll 77 Pelican Cove CO Bluffs, IA 51501		250.	<input checked="" type="checkbox"/>
11/16/05	ID# CK#	Susan Cameron 600 Brentwood Drive Waukee, IA 50263		200.	<input checked="" type="checkbox"/>
11/16/05	ID# CK#	Robert Laubenthal 9 Horizon Drive CO Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
11/14/05	ID# 8052 CK# 5224	Dupont Government Fund 1007 Market Street Wilmington, DE 19898		100.	<input type="checkbox"/>
11/14/05	ID# 8363 CK# 0220	Syngenta Corp. PAC 2 Righter Parkway Wilmington, DE 19850		250.	<input type="checkbox"/>
11/14/05	ID# 8429 CK# 2688	PCI PAC 2600 S River Road Des Plaines, IL 60018		150.	<input type="checkbox"/>
11/18/05	ID# CK#	John Jerkovich 535 W Broadway, Ste 100 CO Bluffs, IA 51503		100.	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1400.	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)**  
 CITIZENS FOR STRUYK

**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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11/18/05	ID# CK#	Anne McKeown 133 Glen Oaks Drive CO Bluffs, IA 51503		\$150.	<input checked="" type="checkbox"/>
11/29/05	ID# CK#	Brad Skinner 1810 Andrews Drive Pleasant Hill, IA 50321		500.	<input type="checkbox"/>
11/29/05	ID# CK#	Kyle Skinner 4940 Copper Creek Pleasant Hill, IA 50321		500.	<input type="checkbox"/>
12/7/05	ID# 9675 CK# 1063	OAAI PAC 3101 SW 61st St. Des Moines, IA 50321		500.	<input type="checkbox"/>
12/7/05	ID# 9687 CK# 1063	Grinnell Mutual PAC 4215 Hwy 146 Grinnell, IA 50112		100.	<input type="checkbox"/>
12/8/05	ID# 8473 CK# 1669	Aquila, Inc Employee Federal PAC 20 W 4th St Kansas City, MO 64105		200.	<input type="checkbox"/>
12/10/05	ID# 8107 CK# 1507	Enterprise Rental Car PAC 600 Corporate Park Drive St Louis, MO 63105		250.	<input checked="" type="checkbox"/>
12/10/05	ID# CK#	Douglas Goodman 17341 Turnberry Ridge CO Bluffs, IA 51503		50.	<input checked="" type="checkbox"/>
12/10/05	ID# 6082 CK# 1119	Midamerican Energy Effective Gov't Committee 666 Grand Ave Des Moines, IA 50303		750.	<input type="checkbox"/>
12/15/05	ID# 6101 CK# 3159	Motor Carriers PAC PO BOX 6121, E Des Moines Str. Des Moines, IA 50309		500.	<input type="checkbox"/>
SUB-TOTAL				\$3500.	
TOTAL (if last page of this schedule)				\$	

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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)  
**CITIZENS FOR STRUYK**

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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
12/15/05	ID# 9701 CK# 2020	Iowa mortgage ASSOC PAC 8800 NW 62nd Ave Johnston, IA 50131		\$100.	<input checked="" type="checkbox"/>
12/15/05	ID# CK#	Stan Poe 348 Brentwood Dr. NE Cedar Rapids, IA 52402		500.	<input checked="" type="checkbox"/>
12/15/05	ID# CK#	Craig Schoenfeld 437 S 49th Court W Des Moines, IA 50265		250.	<input checked="" type="checkbox"/>
12/15/05	ID# CK#	Kirk Tyler 3345 Waterberry Circle Waukee, IA 50263		500.	<input checked="" type="checkbox"/>
12/21/05	ID# CK#	Eugene Gochenour 2075-174th Trail mondamin, IA 51557		100.	<input type="checkbox"/>
12/21/05	ID# 8251 CK# 1563	PRINPAC 711 High Street Des Moines, IA 50392		250.	<input type="checkbox"/>
12/23/05	ID# 9733 CK# 1003	AAPT-PAC 1211 Vinc St, Ste 2230 W Des Moines, IA 50265		100.	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1800.  
\$ 25,650

TOTAL (if last page of this schedule)

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FOR INSTRUCTIONS, SEE BACK OF 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)  
**Citizens For Struyk**

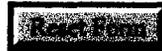
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/6/05	ID# CK# 1116	Republican Party of Iowa 621 East 9th Des Moines, IA 50309	Membership	\$ 500.
1/21/05	ID# CK# 1117	STRUYK TURF 19933 Virginia Hills Rd CO Bluffs, IA 51503	Reimbursement of January mobile phone	237.86
1/25/05	ID# CK# 1118	Jill Struyk 219 Carson CO Bluffs, IA 51503	Reimbursement for envelopes and photo paper	135.91
3/1/05	ID# CK# 1119	CB Online 300 W Broadway #265 CO Bluffs, IA 51503	January, February & March website hosting	90.00
3/1/05	ID# CK# 1120	STRUYK TURF 19933 Virginia Hills Rd CO Bluffs, IA 51503	February mobile phone reimbursement	266.38
4/8/05	ID# CK# 1121	Daily Nonpareil 535 W Broddway #300 CO Bluffs, IA 51503	Subscription - 6 months	59.90
4/8/05	ID# CK# 1122	CB Online 300 W Broadway #265 CO Bluffs, IA 51503	April, May & June website hosting & domain name renewal	125.00
4/20/05	ID# CK# 1123	STRUYK TURF 19933 Virginia Hills Rd CO Bluffs, IA 51503	March mobile phone reimbursement	281.41
SUB-TOTAL				\$ 1696.46
TOTAL (if last page of this schedule)				\$

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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>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)  
**CITIZENS FOR STRUYK**

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
5/16/05	ID# CK# 1124	Struyk Turf 19933 Virginia Hills Rd Co. Bluffs, IA 51503	April mobile phone reimbursement	\$398.64
5/20/05	ID# CK# 1125	Republican Party of Iowa 621 East 9th Des Moines, IA 50309	Donation	500.00
5/24/05	ID# CK# 1126	Struyk Turf 19933 Virginia Hills Rd Co Bluffs, IA 51503	May mobile phone reimbursement	405.15
6/16/05	ID# CK# 1127	Struyk Turf 19933 Virginia Hills Rd Co Bluffs, IA 51503	June mobile phone reimbursement	430.13
6/28/05	ID# CK# 1128	Republican Party of Iowa 621 East 9th Des Moines, IA 50309	Donation	500.00
7/13/05	ID# CK# 1129	Party Time Rentals 302 S 3rd St Ames, IA 5000	Tent rental for Republican party tent @ Turf Grass Field Day	165.85
7/18/05	ID# CK# 1130	Struyk Turf Ltd 19933 Virginia Hills Rd Co Bluffs, IA 51503	July mobile phone reimbursement	212.11
7/18/05	ID# CK# 1131	CB Online 300 W Broadway #265 Co Bluffs, IA 51503	July, Aug, sept website hosting	90.00
SUB-TOTAL				\$2701.88
TOTAL (If last page of this schedule)				\$

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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>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)  
**Citizens For Struyk**

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
8/8/05	ID# CK# 1132	Mackonold Letter Serville 1632 Ohio Des Moines, IA 50314	Fundraiser mailing	\$891.50
8/11/05	ID# CK# 1133	Jill Struyk 219 Carson Co Bluffs, IA 51503	Reimbursement for campaign computer	1391.00
8/16/05	ID# CK# 1134	Struyk Turt Ltd 19933 Virginia Hills Rd Co Bluffs, IA 51503	August mobile phone reimbursement	214.08
8/16/05	ID# CK# 1135	Postmaster 8 S 6th Street Co Bluffs, IA 51503	Post office Box rental	38.00
9/19/05	ID# CK# 1136	Struyk Turt Ltd 19933 Virginia Hills Rd Co Bluffs, IA 51503	Sept. mobile phone reimbursement	212.42
10/4/05	ID# CK# 1137	Jill Struyk 219 Carson Co Bluffs, IA 51503	Reimbursement for toner	88.80
10/4/05	ID# CK# 1138	Daily Nonparail 535 W Broadway #200 Co Bluffs, IA 51503	One year subscription	119.80
10/4/05	ID# CK# 1139	CB Online 300 W Broadway #265 Co Bluffs, IA 51503	Oct, NOV, Dec Website hosting	90.00
SUB-TOTAL				\$3045.60
TOTAL (If last page of this schedule)				\$

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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>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)  
**CITIZENS FOR STRUYK**

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
10/12/05	ID# CK# 1140	Jill Struyk 219 Carson Co. Bluffs, IA 51503	Reimbursement for Thank you stationery	\$ 186.60
10/13/05	ID# CK# 1141	Jill Struyk 219 Carson Co. Bluffs, IA 51503	Mileage	84.60
10/19/05	ID# CK# 1142	STRUYK TURF LTD 19933 Virginia Hills Rd Co Bluffs, IA 51503	Oct mobile phone reimbursement	212.56
10/26/05	ID# CK# 1143	Republican Party of IA 621 East 9th Des Moines, IA 50309	Postage for mailing	84.60
11/29/05	ID# CK# 1144	Bradley's Floral 19267 Conifer Lane Co. Bluffs, IA 51503	Thank you flowers sent to fundraiser host	39.10
11/29/05	ID# CK# 1145	STRUYK TURF LTD 19933 Virginia Hills Rd Co Bluffs, IA 51503	NOV mobile phone reimbursement	216.68
12/15/05	ID# CK# 1146	STRUYK TURF LTD 19933 Virginia Hills Rd Co Bluffs, IA 51503	Dec mobile phone reimbursement	214.48
1/1/05	ID# CK#	Peoples National Bank 201 Bennett Ave Co Bluffs, IA 51503	check re-order bank charge	16.85
SUB-TOTAL				\$ 1055.47
TOTAL (if last page of this schedule)				\$

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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**

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

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

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
9/7/05	ID# CK#	Republican Party of Iowa 621 East 9th Des Moines, IA 50309	reimbursement of fundraiser mailing-Macdonald Letter SVC	\$ (675.)
	ID# CK#			
SUB-TOTAL				\$ (675)
TOTAL (if last page of this schedule)				\$ 7824.41

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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)

CITIZENS FOR STRUYK

SCHEDULE <b>E</b> (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
10/20/05	Mona Bond 2318 W 1st St Ankeny, IA 50021		Food	\$ 100.	<input checked="" type="checkbox"/>
11/10/05	Dan Kinney 600 Oakland Ave Cobbluffs, IA 51503		Food For Fundraising	374.69	<input checked="" type="checkbox"/>
12/15/05	Craig Schoentfeld 437 S 49th Court West Des Moines, IA 50265		Room charge Food & Beverage	52.18	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$

TOTAL (If last page of this schedule)

\$ 526.87

\*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.