

DISCLOSURE SUMMARY PAGE

RECEIVED

FORM DR-2 (Rev. 10/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm #	315
Logged In	
Scanned	
Computer	5-4-06
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)
Wise Voters

IMPORTANT: Indicate by # type of committee you are reporting for: 1
 (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 Phillip Wise	Political Party (if applicable) Democrat
Office Sought Iowa House of Representatives	District (if Senate or House) House #92

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.

SIGNATURE OF PERSON FILING REPORT Signed letter attached **TELEPHONE** _____ **DATE SIGNED** _____

I AM FILING A Amended REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) _____ Indicate by # 2

CHECK IF AMENDMENT TO REPORT DATED January 19, 2006

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.)	\$ 2,389.43
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	11,225.18
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	\$ 13,614.61
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	5,503.25
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)	\$ 8,111.36
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ _____
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 489.66
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ _____
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO
CANDIDATE COMMITTEES ONLY:	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ 0.00
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.	

DISCLOSURE SUMMARY PAGE

Reset For.

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>315</u>
Logged In	<u>SW</u>
Scanned	<u>✓</u>
Computer	<u>WRS</u>
Audited	<u>4-13-06</u>

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

WISE VOTERS

IMPORTANT: Indicate by # type of committee you are reporting for: 1
 (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 PHILLIP WISE Political Party (if applicable) DEMOCRAT
 Office Sought IOWA HOUSE OF REP. District (if Senate or House)

JAN 10 2006
pm 1-18

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.

Sery A. Keams 319-524-1570 1-17-2006
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A JANUARY 19, 2006 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.)	\$	<u>2,389.43</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		<u>11,225.18</u>
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	\$	<u>13,614.61</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>5,503.25</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>8,111.36</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$	_____
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>489.66</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	_____
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES <input checked="" type="checkbox"/> 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 Fo.

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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)
WISE VOTERS

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
—	ID# CK# —	LEFT BLANK —	—	\$ —	<input type="checkbox"/>
1/7/05	ID# CK#	Michael Cameron 2202 NW 140th Street Clive, IA 50325		100.00	<input checked="" type="checkbox"/>
	ID# 6096 CK# 1862	Manufactured Housing PAC 1400 Dean Avenue Des Moines, IA 50316-3938		200.00	<input checked="" type="checkbox"/>
	ID# 6004 CK# 4264	Associated General Contractors of Iowa PAC 701 E. Court Avenue Des Moines, IA 50309-4901		200.00	<input checked="" type="checkbox"/>
	ID# CK#	Steven Ackerson 1634 NW 131st Clive, IA 50325		100.00	<input checked="" type="checkbox"/>
	ID# 6404 CK# 2025	Iowa Retail PAC 2175 NW 86th Street, Ste 14 Clive, IA 50325		100.00	<input checked="" type="checkbox"/>
	ID# CK#	Craig R. Schoenfeld 427 49th Court West Des Moines, IA 50265		100.00	<input checked="" type="checkbox"/>
	ID# CK#	Rod Aycox 2000 Leadenhall Way Alpharetta, GA 30022-6285		500.00	<input checked="" type="checkbox"/>
	ID# 6042 CK# 1196	Grocers PAC 2540 106th Street, Ste 102 Des Moines, IA 50322		150.00	<input checked="" type="checkbox"/>
	ID# 6125 CK# 002469	Iowa Realtors PAC 1370 NW 114th Street, Ste 100 Clive, IA 50325		250.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1700.00	
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 Fo

Reset

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)

WISE VOTERS

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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✓ 1/7/05	ID# 6234 CK# 4045	IFBF PAC 5400 University Avenue West Des Moines, IA 50266-5997		\$150.00	✓
✓	ID# 6101 CK# 3121	Motor Carriers PAC PO Box 6121, East Des Moines Station Des Moines, IA 50309		100.00	✓
✓	ID# 6429 CK# 1923	Heavy Highway PAC 2415 Ingersoll Avenue Des Moines, IA 50312-5233		250.00	✓
✓	ID# 6118 CK# 2156	Iowa Optometric Assn. PAC 1454 30th Street, Ste 204 West Des Moines, IA 50266		100.00	✓
✓	ID# 6070 CK# 3187	Iowa LAW PAC 521 East Locust Street, 3rd Floor Des Moines, IA 50309-1939		200.00	✓
✓	ID# 6056 CK# 3407	Bankers Unite in Legislative Decisions 8800 NW 62nd Avenue Johnston, IA 50131-6200		250.00	✓
✓	ID# 6069 CK#	IIPAC 904 Walnut, Suite 100 Des Moines, IA 50309-3503		100.00	✓
✓	ID# 6052 CK# 2865	Independent Insurance Agents of Iowa PAC 4000 Westown Parkway, Suite 200 West Des Moines, IA 50265		100.00	✓
✓	ID# 6099 CK# 1015	Meredith Corporation 1716 LOCUST DES MOINES, IA 50309-3023		250.00	✓
✓ 1/15/05	ID# 9695 CK# 1043	ILTA PAC PO Box 206 Eldora, IA 50627	See amended transaction	100.00	✓
SUB-TOTAL				\$1600.00	✓
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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

CONTRIBUTIONS -- MONEY TAKEN IN

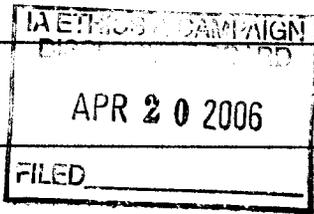
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
 Wise Voters - AMENDED DATE - ITEM #10, PAGE 2 OF 1/19/2006 REPORT

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
	ID# CK#	No change in items 1 through 9 from originally filed form.		\$	<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"/>
1/08/2005	ID# 9655 CK# 1043	ILTA PAC P.O. Box #206 Eldora, IA 50627		100.00	<input checked="" type="checkbox"/>



SUB-TOTAL

\$
\$

TOTAL (if last page of this schedule)

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For Instructions, See Back of Fo

Reset

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)

WISE VOTERS

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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
6/29/05	ID# CK#	Robert E. Josten 801 Grand, Suite 3900 Des Moines, IA 50309		\$100.00	<input checked="" type="checkbox"/>
	ID# 6486 CK# 1505	Iowa Telecom PAC 115 S 2nd Avenue West Newton, IA 50208		150.00	<input checked="" type="checkbox"/>
	ID# 6033 CK# 1055	EMC CO PAC for Responsible State Government 717 Mulberry Street Des Moines, IA 50309		100.00	<input checked="" type="checkbox"/>
	ID# CK#	Rod Aycox 2000 Leadenhall Way Alpharetta, GA 30022-6285		250.00	<input checked="" type="checkbox"/>
	ID# CK#	Janet Griffin 410 27th Street Des Moines, IA 50312		100.00	<input checked="" type="checkbox"/>
	ID# CK#	Stephen W. Roberts 2500 Financial Center Des Moines, IA 50309-3946		50.00	<input checked="" type="checkbox"/>
	ID# 6056 CK# 3428	Bankers Unite in Legislative Decisions 8800 NW 62nd Avenue Johnston, IA 50131-6200		200.00	<input checked="" type="checkbox"/>
	ID# 6052 CK# 2891	Independent Insurance Agents of IA PAC 4000 Westown Parkway, Ste 200 West Des Moines, IA 50265		200.00	<input checked="" type="checkbox"/>
	ID# 6058 CK# 2622	Iowa Chiropractic Society 1605 N. Ankeny Blvd, Suite 200 Ankeny, IA 50021-4159		100.00	<input checked="" type="checkbox"/>
	ID# 6125 CK# 2490	Iowa Realtors PAC 1370 NW 114th Street, Suite100 Clive, IA 50325		500.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1750.00	<input checked="" type="checkbox"/>
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Fo.

Reset

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)
WISE VOTERS

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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
6/29/05	ID# 6046 CK# 3972	Justice for All PAC 218 6th Avenue, Suite 526 Des Moines, IA 50309-4091		\$100.00	<input checked="" type="checkbox"/>
	ID# 6059 CK# 2678	Iowa Committee of Automotive Retailers 1111 Office Park Road West Des Moines, IA 50265		100.00	<input checked="" type="checkbox"/>
	ID# 6118 CK# 2189	Iowa Optometric Association PAC 1454 30th Street, Suite 204 West Des Moines, IA 50266		150.00	<input checked="" type="checkbox"/>
	ID# 6070 CK# 3203	Iowa LAWPAC 521 East Locust Street, 3rd Floor Des Moines, IA 50309-1939		150.00	<input checked="" type="checkbox"/>
7/22/05	ID# CK#	Cynthia Shriver 2022 Grand Avenue Keokuk, IA 52632		50.00	<input checked="" type="checkbox"/>
	ID# CK#	Daniel Engelhardt 152 Dorothy Street Minoa, NY 13116		100.00	<input checked="" type="checkbox"/>
	ID# CK#	Michael Hocking 105 E. Cleveland New London, IA 52645		25.00	<input checked="" type="checkbox"/>
	ID# CK#	Steven Ackerson 1634 NW 131st Street Clive, IA 50325		100.00	<input checked="" type="checkbox"/>
	ID# 6067 CK# 3280	Iowa Health PAC 6750 Westown Parkway, #100 West Des Moines, IA 50266		100.00	<input checked="" type="checkbox"/>
	ID# 6099 CK# 1028	Meredith Corporation 1716 LOCUST DES MOINES, IA 50309-3023		100.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 975.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of For

Reset

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)
WISE VOTERS

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
✓ 9/21/05	ID# 6107 CK# 3480	QWEST PAC 925 High Street, 9s9 Des Moines, IA 50309		\$2000.00	<input checked="" type="checkbox"/>
✓	ID# 6429 CK# 1943	Heavy Highway PAC 2415 Ingersoll Avenue Des Moines, IA 50312-5233		500.00	<input checked="" type="checkbox"/>
	ID# CK#	Rod Aycox 2000 Leadenhall Way Alpharetta, GA 30022-6285		750.00	<input checked="" type="checkbox"/>
	ID# CK#	Julie A. Smith 3917 Hillcrest Drive Des Moines, IA 50310-4334		50.00	<input checked="" type="checkbox"/>
	ID# CK#	Donald Rowen 3407 Crocker Des Moines, IA 50312		25.00	<input checked="" type="checkbox"/>
✓ 10/13/05	ID# 6237 CK# 1773	ABATE PAC 3118 Eastern Avenue, NE Cedar Rapids, IA 52402		100.00	<input type="checkbox"/>
✓ 11/15/05	ID# 8061 CK# 6344	Citigroup Inc. PAC 1101 Pennsylvania, NW., Suite 1000 Washington, DC 20004		100.00	<input type="checkbox"/>
✓ 11/19/05	ID# 8429 CK# 2687	PCI PAC 2600 South River Road Des Plaines, IL 60018-3286		100.00	<input type="checkbox"/>
✓	ID# 315 8363 CK# 0217	Syngenta Corporation PAC 2 Righter Parkway, PO Box 15458 Wilmington, DE 19850-5448		250.00	<input type="checkbox"/>
12/16/05	ID# CK#	Michael Medved 6600 Westown Parkway West Des Moines, IA 50266		375.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 4250.00	<input checked="" type="checkbox"/>
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Fo.

Reset 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)
WISE VOTERS

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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
12/16/05	ID# CK#	Linda J Myers Revocable Trust 6600 Westown Parkway West Des Moines, IA 50322		\$375.00	<input checked="" type="checkbox"/>
12/21/05	ID# CK#	Craig H. Neilsen 8620 Titleist Circle Las Vegas, NV 89117		200.00	<input checked="" type="checkbox"/>
12/29/05	ID# 8251 CK# 1575	PRINPAC 711 High Street Des Moines, IA 50392		350.00	<input checked="" type="checkbox"/>
12/31/05	ID# CK#	(Not a contribution, interest on savings ^{CHECKING} account) Keokuk Savings Bank, 501 Main Keokuk, IA 52632		25.18	<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

\$ 950.18

TOTAL (if last page of this schedule)

\$ 1,225.18

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset 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)
WISE VOTERS

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#	Qwest Communications 5325 Zuni Street, Room 779 Refund Denver, CO	(PARTIAL) (Reverse Entry) Refund for telephone service installation for 2004 campaign headquarters. Ref #1636337	\$ (235.94)
1/14/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	60.52
1/26/05	ID# CK#	James Cobb Photography 320 Grand Avenue West Des Moines, IA 50265	Photography services for campaign	123.49
2/4/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	52.66
2/24/05	ID# CK#	Postmaster 214 South Second Keokuk, IA 52632	Postage stamps	150.00
3/7/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	59.71
3/11/05	ID# 9098 CK#	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50319	Contribution	100.00
3/25/05	ID# CK#	Postmaster 214 South Second Keokuk, IA 52632	Postage	59.00
SUB-TOTAL				\$ 369.44
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

Reset 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)
WISE VOTERS

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
4/1/05	ID# CK#	Orchid Suites 1309 Emerson Street NW Washington, DC 20011	Internet site domain and setup	\$ 279.95
4/1/05	ID# CK#	Postmaster 214 South Second Keokuk, IA 52632	Postage	74.83
4/4/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	54.06
4/11/05	ID# CK#	Daily Gate City 1016 Main Keokuk, IA 52632	Congratulatory ad (sports team)	80.00
4/19/05	ID# CK#	Postmaster 214 South Second Keokuk, IA 52632	Postage	173.95
5/3/05	ID# CK#	Burlington Hawkeye Newspaper 800 S. Main Burlington, IA 52601	Subscription	123.00
5/3/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	47.04
5/3/05	ID# CK#	Orchid Suites 1309 Emerson Street NW Washington, DC 20011	Internet site expense	15.00
SUB-TOTAL				\$ 847.83
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).)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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.

SCHEDULE 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)
WISE VOTERS

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
6/7/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	\$ 52.69
7/2/05	ID# CK#	Phil Wise (Candidate) 503 Grand Keokuk, IA 52632	Reimburse ^{CAMPAIGN} mileage 2004 4,150 mi x .29¢	1203.50
7/11/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	85.88
8/4/05	ID# CK#	Lee County Democratic Party C/O Peggy Pohlpetter 1535 Avenue L, Ft Madison, IA 52627	Contribution	50.00
9/1/05	ID# 9098 CK#	Iowa Democratic Party Truman Fund 5661 Fleur Drive Des Moines, IA 50319	Contribution	150.00
9/3/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	158.59
10/5/05	ID# CK#	Orchid Suites 1309 Emerson Street NW Washington, DC 20011	Internet site expense	75.00
10/5/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	52.59
SUB-TOTAL				\$ 1828.25
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

Reset 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)

WISE VOTERS

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
10/5/05	ID# CK# 1068	Labor Day Media 301 Blondeau Keokuk, IA 52632	Reverse Entry - Campaign ad (check was lost)	\$ (150.00)
10/5/05	ID# CK#	Labor Day Media 301 Blondeau Keokuk, IA 52632	Campaign Ad (replaces check number 1068 for campaign ad, check lost)	150.00
11/23/05	ID# CK#	Labor Day Media 301 Blondeau Keokuk, IA 52632	2004 Labor Day Campaign Ad	150.00
11/23/05	ID# CK#	Bankers Advertising 2800 Highway Six East, PO 2687 Iowa City, IA 52244	Printinig of State House calendars	365.23
12/1/05	ID# 9098 CK#	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50319	Contribution	1000.00
12/3/05	ID# CK#	Postmaster 214 South Second Keokuk, IA 52632	Postage for calendars	148.09
12/5/05	ID# CK#	US Cellular PO Box 203 Palatine, IL 60055	Cellular phone service	61.34
12/16/05	ID# CK#	Postmaster 214 South Second Keokuk, IA 52632	Postage	33.00
SUB-TOTAL				\$ 1757.66
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

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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

Reset 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)
WISE VOTERS

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
12/22/05	ID# CK#	Phil Wise (Candidate) 503 Grand Keokuk, IA 52632	Reimburse for campaign mileage 2005 1534 miles at .34 a mile and lodging on 6/28 and 9/20/05	\$ 655.07
12/29/05	ID# CK#	Orchid Suites 1309 Emerson Street NW Washington, DC 20011	Web site maintenance	45.00
	ID# CK#			
SUB-TOTAL				\$ 700.07
TOTAL (if last page of this schedule)				\$ 5503.25

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FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Reset 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
1/6/05	Mona Bond 2818 W. First Street Ankeny, IA 50021		Refreshment and materials for fundraiser	\$ 156.18	<input checked="" type="checkbox"/>
6/28/05	Iowa Democratic Party Truman Fund Fleur Drive Des Moines, IA 50317		Postage for mailing	23.00	<input checked="" type="checkbox"/>
7/15/05	James W. Carney 303 Locust Street, 400 Homestead Bldg. Des Moines, IA 50309-1770		Food and beverage for fundraiser	244.88	<input checked="" type="checkbox"/>
9/20/05	Iowa Democratic Party Truman Fund Fleur Drive Des Moines, IA 50317		Postage for mailing	8.00	<input checked="" type="checkbox"/>
9/29/05	Iowa Cable and Telecommunications Assn 8350 Hickman Road, Suite 2 Clive, IA 50325		Food and beverage for fundraiser	19.15	<input checked="" type="checkbox"/>
9/29/05	Meredith Corporation PAC 1716 Locust Street Des Moines, IA 50309		Food and beverage for fundraiser	15.38	<input checked="" type="checkbox"/>
9/29/05	Bill Zinkewich 1770 Bill Sharp Blvd. Muscatine, IA 52761		Food and beverage for fundraiser	23.07	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 489.66	
TOTAL (if last page of this schedule)				\$ 489.66	

*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.

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

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

Reset Form

SCHEDULE H (Rev. 07/03)	CAMPAIGN PROPERTY
ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.	
<input 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
8/27/04	COMPUTER	1591.58	0

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) \$ 0

** PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ _____ TOTALS \$ 1 \$ 1

* If estimated, show *est.* beside figure.

(Attach Additional Schedules if Needed)