

FOR INSTRUCTIONS, SEE BACK OF FORM

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DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005) DISCLOSURE REPORT For Office Use Only Comm. # 5134 Logged In [signature] Scanned [signature] Computer [signature] Audited

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

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 MARK YACKLE Political Party (if applicable) DEMOCRATE Office Sought GOVERNOR District (if Senate or House)

IA ETHICS & CAMPAIGN DISCLOSURE BOARD JAN 20 2006 FILED 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.

SIGNATURE OF PERSON FILING REPORT [signature] TELEPHONE 712-867-4432 DATE SIGNED 1-17-06

I AM FILING A 1-19-06 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR. 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

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$0), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 335.00, Schedule F: Loans Received total, Schedule H: Total Sales of Campaign Property), SUB-TOTAL (\$335.00), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: Expenditures total, Schedule F: Loan Repayments total), CASH ON HAND at the end of this reporting period (\$335.00), **UNPAID BILLS, **IN KIND CONTRIBUTIONS, **OUTSTANDING LOANS, CONSULTANT BREAKDOWN (YES/NO), CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY, STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

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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)
YACKLE FOR GOVERNOR

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
11-7-05	ID# CK# 5254	SUSAN M. WILANDER 45454 US. 71 LAUREL, MN. 56461	SISTER	\$ 100.00	<input type="checkbox"/>
8-22-05	ID# CK# 3214	WAYNE WEST 4180 Hwy 9 ESTHERVILLE, IA 51334		100.00	<input type="checkbox"/>
	ID# CK#	UNITEMIZED CONTRIBUTION		135.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 335.00	
TOTAL (if last page of this schedule)				\$ 335.00	

* 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.