

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

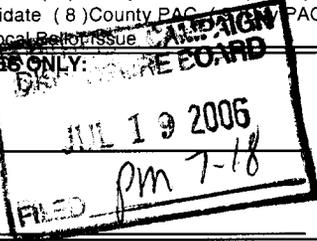
FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1651
Logged In	SW 9
Scanned	
Computer	
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

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 Tim Hoy	Political Party (if applicable) Democrat
Office Sought State Representative	District (if Senate or House) 44



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.

Genet Dirks 641-939-2174 7-18-2006
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A July 14, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by # 1

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.)	\$ 1,740.00
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	5,325.00
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ 7,065.00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	2,548.77
Schedule F: Loan Repayments total (Attach Schedule F)	0.00
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 4,516.23
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 0.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 0.00
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.

For Instructions, See Back of Form

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)
 Hoy for House

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), 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
6/1/06	ID# CK#	John M Doneth 633 Glynbrook St N Keizer, OR 97303	Cousin	\$50	<input type="checkbox"/>
6/1/06	ID# CK#	R John & Deanna Strolle 2015 Groesbeck Ave Lansing, MI 48912-3446		25	<input type="checkbox"/>
6/1/06	ID# CK#	Virginia Doneth 1053 Lantern Hill Dr East Lansing, MI 48823	Aunt	100	<input type="checkbox"/>
6/1/06	ID# CK#	Paul Primus 34547 210th St Steamboat Rock, IA 50672		50	<input type="checkbox"/>
6/1/06	ID# CK#	Kay Bach 15199 West Barton Lake Dr Vicksburg, MI 49097	Cousin	30	<input type="checkbox"/>
6/1/06	ID# CK#	B Kent Williams 128 Bellaire Rd Waterloo, IA 50701		100	<input type="checkbox"/>
6/1/06	ID# CK#	Daryl & Michele Connell 2646 168th Ave SE Bellevue, WA 98008	Cousin	200	<input type="checkbox"/>
6/1/06	ID# CK#	CF & RJ O'Neil 54 Crescent Dr Columbia Falls, MT 59912		25	<input type="checkbox"/>
6/1/06	ID# CK#	Shelley S Stull 15 E 8th St Apt 3 Cincinnati OH 45202	Sister-in-law	500	<input type="checkbox"/>
6/1/06	ID# CK#	Jean T & Meng F Lim 802 Eclipse Pkwy New Prague, MN 56071		250	<input type="checkbox"/>

SUB-TOTAL
 \$ 1330.00
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 Form

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)
Hoy for House

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), 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
6/13/06	ID# CK#	TJ Johnsrud 114 Oakwood Dr Conrad, IA 50621		\$50	<input type="checkbox"/>
6/13/06	ID# CK#	John & Jodi Deery 3224 Abraham Dr Cedar Falls, IA 50613		100	<input type="checkbox"/>
6/13/06	ID# CK#	Christopher & Teresa Brown 909 14th St Eldora, IA 50627		100	<input type="checkbox"/>
6/13/06	ID# CK#	Patricia A Reuter 2829 4th St Ct East Moline, IL 61244	Cousin	25	<input type="checkbox"/>
6/13/06	ID# CK#	Kevin D & Marjorie R Hoy PO Box 190716 Hungry Horse, MT 59919	Brother	200	<input type="checkbox"/>
6/13/06	ID# CK#	Robin & Maurice J Bompezzi 4623 Breckenridge NE Grand Rapids, MI 49525-1326	Cousin	25	<input type="checkbox"/>
6/26/06	ID# CK#	Hardin Co Democratic Central Comm c/o Kurtis R Kelsey 14083 P Ave		300	<input type="checkbox"/>
6/26/06	ID# CK#	Carroll J Hobson 22242 T Ave Eldora, IA 50627		35	<input type="checkbox"/>
6/26/06	ID# CK#	Steve J Bompezzi 1408 Shady Lane Dr Owosso, MI 48867	Uncle	50	<input type="checkbox"/>
7/7/06	ID# CK#	Doug Coffman 27623 170th St Iowa Falls, IA 50126		100	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 985	
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

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)
Hoy for House

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), 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
7/7/06	ID# CK#	Linda C Ashton 449 N Wells Chicago, IL 60610	Cousin	\$100	<input checked="" type="checkbox"/>
7/7/06	ID# CK#	Harold & Mildred LLOYD 31786 280th St Gifford IA 50259		100	<input checked="" type="checkbox"/>
7/7/06	ID# CK#	Kenneth C Dunn 1804 Pine St No 3 Boulder, CO 80302-4378		100	<input checked="" type="checkbox"/>
7/7/06	ID# CK#	Joseph & Alice Hoy 4261 Shetland Ct Apt 102 Naples, FL 34112-3744	Uncle	25	<input checked="" type="checkbox"/>
7/7/06	ID# CK#	Stephen & Cornelia Throssel 714 17th Ave Eldora, IA 50627		100	<input checked="" type="checkbox"/>
7/7/06	ID# CK#	Steven Gates 3633 N Harding Ave Chicago, IL 60618		300	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Mary Lou Lawler 902 16th Ave Eldora, IA 50627		50	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Ann Kramer 900 10th St Eldora, IA 50627		100	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Donald & Opal Brown 720 17th Ave Eldora, IA 50627		100	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Shelley S Stull 15 E 8th St Apt 3 Cincinnati, OH 45202	Sister-in-law	100	<input checked="" type="checkbox"/>

SUB-TOTAL
\$ 1075
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

Reset 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)

Hoy for House

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), 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
7/14/06	ID# CK#	Charles E Ruby 31272 Hwy D-35 Steamboat Rock, IA 50672		\$50	<input checked="" type="checkbox"/>
7/14/16	ID# CK#	John M & Dalene Dolan 2122 River Road Iowa Falls, IA 50126		50	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	WT Brackett 4801 Oakwood Ln West Des Moines, IA 50265-5419		100	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Doris N Miller 121 Mildred Ave Iowa Falls, IA 50126		50	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	James & Norene Johnson 32290 Hwy 175 Eldora, IA 50627		25	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	David W Dunn PO Box 556 Eldora, IA 50627		100	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Gene K Foster 1401 17th Ave Eldora, IA 50627		10	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Mary Beth Lawler 111 Foster Blvd Iowa Falls, IA 50126		50	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Paul & Jane Primus 34547 210th St Steamboat Rock, IA 50672		100	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Ann & Bruce Sheehy 733 E Palmaire Phoenix, AZ 85020		100	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 635

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

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)
Hoy for House

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), 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
7/14/06	ID# CK#	Willard & Reita Acord 2618 Cooper Ave State Center, IA 50247		\$100	<input checked="" type="checkbox"/>
7/14/06	ID# 6085 CK# 824	IA State Bldg & Construction Trades Council Political Education Comm 110 10th Ave NW		500	<input checked="" type="checkbox"/>
7/14/06	ID# 6449 CK# 1167	IA Laborers Political Action Comm Fund 5806 Meredith Dr Suite B Des Moines, IA 50322		150	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Leon & Mary Ellen Doughty 913 10th St Eldora, IA 50627		250	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	WA Krause Revocable Trust 6400 Westown Pkwy West Des Moines, IA 50266		100	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Edgar Bills 417 Birch Ave Eldora, IA 50627		100	<input checked="" type="checkbox"/>
7/14/06	ID# CK#	Anthony Voss 2406 Glenwood Dr Des Moines, IA 50321-1530		100	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1300	
TOTAL (if last page of this schedule)				\$ 5325.00	

* 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.

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)
Hoy for House

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
5/16/06	ID# CK# 1001	Carter Printing Co. 1739 E Grand Des Moines, IA 50316	printing	\$ 336.02
5/16/06	ID# CK# 1002	Postmaster US Post Office 1334 Edgington Ave	stamps	39.00
6/21/06	ID# CK# 1003	Carter Printing Co. 1739 E Grand Des Moines, IA 50316	printing yard signs and campaign cards	2173.75
	ID# CK#			
SUB-TOTAL				\$ 2548.77
TOTAL (if last page of this schedule)				\$ 2548.77

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).)