

DISCLOSURE SUMMARY PAGE

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IA ETHICS & CAMPAIGN
DISCLOSURE BOARD
JUL 20 2006
FILED PIM 7-18

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

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 <u>Reg Kauffman</u>	Political Party (if applicable) <u>Democrat</u>
Office Sought <u>Iowa House of Representatives</u>	District (if Senate or House) <u>House 83</u>

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>1649</u>	
Logged In <u> </u>	
Scanned <u> </u>	
Computer <u> </u>	
Audited <u> </u>	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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.

Reg. Kauffman
SIGNATURE OF PERSON FILING REPORT

1-563-246-2779
TELEPHONE

7-17-06
DATE SIGNED

I AM FILING A July 19, 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.)	\$ 143.50
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....	1,945.00
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>	
SUB-TOTAL	\$ 2,088.50
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....	1,090.85
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).....	\$ 997.65
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ _____
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ <u>199.95</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)	\$ _____
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.	

For Instructions, See Back of Form

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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)

Elect Reg Kauffman

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
5/16/06	ID# CK# 2746	Mary P Bukta 604 S.32nd St. Clinton, Ia 52732		\$ 50.00	<input type="checkbox"/>
6/5/06	ID# cash pass CK# the hat	Carpenters Local 4 members 6623 W. Kimberly Rd Davenport Ia. 52806-6614.		221.00	<input type="checkbox"/>
6/7/06	ID# 8077 CK# 859	Heartland Regional Council 201 Ero St Sterling Il. 61081-3945		250.00	<input type="checkbox"/>
6/22/06	ID# 25 CK# 1026	Plumbers and Pipefitters Local 25 4600 46th Ave Rock Island Il 61201		1,000.00	<input type="checkbox"/>
6/25/06	ID# CK# 9352	Joseph D. Mirfield 23857 Territorial Road LeClaire, Ia. 52753		100.00	<input type="checkbox"/>
7/11/06	ID# CK# 4351	Barbara Craig Thiede P O box 66 304 Pleasant St Lost Nation Ia. 52254-0066		50.00	<input type="checkbox"/>
7/10/06	ID# cash pass CK# the hat	Carpenters Local 4 members 6623 W. Imberly Road Davenport Ia. 52806-6614		74.00	<input type="checkbox"/>
7/13/06	ID# 8036 CK# 2585	Electrical workers Local 145 political action Comm 1700 52nd Ave Suite A Moline Il 61265		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1,945.00	
TOTAL (if last page of this schedule)				\$ 1,945.00	

* 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

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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CHECK THIS BOX IF AMENDING FORM

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

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

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
6/10/06	ID# CK# 453	Oriental Trading Co. 9101 F St. Omaha NE. 68127	Parade Supplies flags hats banners candy	\$ 122.80
6/16/06	ID# CK# 454	Go Van Gogh 921 ^th Ave. DeWitt Ia. 52742	Printed Tee Shirts Elect Reg Kauffman 2 dozen	252.52
6/26/06	ID# CK# 455	U S Post Office Calamus Ia 52729	Stamps	23.40
6/26/06	ID# CK# 456	Review Printing 311 21st St. Rock Island Il. 61201	Cowboy cards, Posters , stickers	474.35
7/6/06	ID# CK# 457	Go Van Gogh 921 6th Ave DeWitt Ia. 52742	Tee Shirts Elect Reg Kauffman	164.78
7/11/06	ID# CK# 458	Community Scoop P O Box 164 Lost Nation Ia. 52254	News Paper Advertising	40.00
7/13/06	ID# CK# 459	Charles A. Sheridan Clinton County Auditor P O Box 2957 Clinton Ia 52732	Voter files for primary election	13.00
	ID# CK#			
SUB-TOTAL				\$ 1,090.85
TOTAL (if last page of this schedule)				\$ 1,090.85

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

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

Elect Reg Kauffman

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SCHEDULE E (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
6/16/06	Go Van Gogh 921 6th Ave DeWitt Ia. 52742		12 Tee Shirts Elect Reg Kauffman	\$ 126.26	<input type="checkbox"/>
6/16/06	Sherry Deitz Local 4 Secretary 6623 W. Kimberly Rd. Davenport Ia.		Stamps for mailings	19.50	<input type="checkbox"/>
7/8/067/8/0	Go Van Gogh 921 6th Ave DeWitt Ia. 52742		6 Tee Shirts Elect Reg Kauffman	41.19	<input type="checkbox"/>
7/10/06	Hugh McAleer 602 6th Ave DeWitt Ia. 52742		40 used yard sign frames	12.50	<input 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				\$ 199 45	
TOTAL (if last page of this schedule)				\$ 199 45	

*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.