

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

### DISCLOSURE SUMMARY PAGE

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

Committee to Elect Don Palmer

**IMPORTANT:** Indicate by # type of committee you are reporting for:  1  2  3  4  5  6  7  8  9  10  11

( 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 Donald D. Palmer	Political Party (if applicable) Republican
Office Sought Iowa State Legislature	District (if Senate or House) Iowa House District 38

<b>FORM DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	1435
Logged In	SW
Scanned	
Computer	
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> , 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.

SIGNATURE OF PERSON FILING REPORT \_\_\_\_\_ TELEPHONE \_\_\_\_\_ DATE SIGNED \_\_\_\_\_

I AM FILING A 7-14-06

(report date)

IA ETHICS & CAMPAIGN DISCLOSURE BOARD  
JUL 13 2006  
FILED FAX

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by #  1  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

<b>CASH ON HAND</b> at the beginning of the reporting period. (Total of all funds held by the committee. This amount <b>MUST</b> 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.)	\$ 4,366.21
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	4,135.00
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<b>(Schedule H applies to Candidates' Committees Only)</b>	
<b>SUB-TOTAL</b>	\$ 8,501.21
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	2,770.68
Schedule F: Loan Repayments total (Attach Schedule F)	0.00
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 5,730.53
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$ 0.00
<b>**IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$ 1,009.00
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$ 8,393.90
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<b>CANDIDATE COMMITTEES ONLY:</b>	
<b>VALUE OF CAMPAIGN PROPERTY</b> (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

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Committee to Elect Don Palmer

**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
6-7-06	ID# CK#	Barbara Hames 2904 Long Bluff Road NE Cedar Rapids, IA 52402		\$100.00	<input type="checkbox"/>
6-12-06	ID# C00039321 CK# 5613	Pepsico Concerned Citizens Fund Purchase, NY 10577		1500.00	<input type="checkbox"/>
6-14-06	ID# C00413245 CK# 1853	Straight Talk America 211 N. Union Street Suite 200 Alexandria, VA 22314		500.00	<input type="checkbox"/>
6-15-06	ID# CK#	Rose Eaton 608 Carroll Drive SE Cedar Rapids, IA 52403		50.00	<input type="checkbox"/>
6-17-06	ID# CK#	Scott Torticill 241 25th Street Drive SE Cedar Rapids, IA 52403		50.00	<input type="checkbox"/>
6-17-06	ID# CK#	Mark McKinstry 2022 Blake Blvd SE Cedar Rapids, IA 52403		250.00	<input type="checkbox"/>
6-20-06	ID# CK#	Ralph Russell 4415 Beaver Hollow SE Cedar Rapids, IA 52403		100.00	<input type="checkbox"/>
6-22-06	ID# CK#	Peter Teahen 3100 F Ave NW Cedar Rapids, IA 52405		50.00	<input type="checkbox"/>
6-23-06	ID# CK#	Curt Hames PO Box 217 Marion, IA 52322		300.00	<input type="checkbox"/>
6-23-06	ID# CK#	Richard Maret 2735 Blake Blvd SE Cedar Rapids, IA 52403		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2925.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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.

Page 1 of 2  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)  
Committee to Elect Don Palmer

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACT ON 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
6-27-06	ID# CK#	Jeanete Abraham 430 Parkland Drive SE Cedar Rapids, IA 52403		\$50.00	<input type="checkbox"/>
6-27-06	ID# CK#	Harry Royer 330 Rosedale Road SE Cedar Rapids, IA 52403		50.00	<input type="checkbox"/>
6-27-06	ID# CK#	Judith McCracken 135 Tomahawk Trail SE Cedar Rapids, IA 52403		100.00	<input type="checkbox"/>
7-10-06	ID# <b>9705</b> CK# 2226	The Commonwealth Pac - Iowa 45 School Street 2nd Floor Boston, MA 02108		750.00	<input type="checkbox"/>
7-11-06	ID# CK#	William Bloomhall 11361 Compass Point Drive Fort Meyers, FL 33908		100.00	<input checked="" type="checkbox"/>
7-11-06	ID# CK#	Reta Westercamp 4056 Dalewood Ave SE Cedar Rapids, IA 52403		25.00	<input checked="" type="checkbox"/>
7-11-06	ID# CK#	Donald Nebergall 2919 Applewood Plae NE Cedar Rapids, IA 52402		100.00	<input checked="" type="checkbox"/>
7-12-06	ID# CK#	Richard Snyder 3153 Greenflower Court Bonita Springs, FL 34134		25.00	<input checked="" type="checkbox"/>
7-12-06	ID# CK#	Unitemized Contributions		10.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1210.00

TOTAL (if last page of this schedule)

\$ 4135.00

\* 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.

Page 2 of 2  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**Reset 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)  
Committee to Elect Don Palmer

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
6-06-06	ID# CK#	CFC 405 Boyson Road Hiawatha, IA 52233	Hosting-Design Fees for Internet Site	\$ 240.00
7-10-06	ID# CK#	Hy Vee Drug Store 2405 Mt. Vernon Road SE Cedar Rapids, IA 52403	Stamps-Postage	54.60
7-10-06	ID# CK#	Linda Palmer 1436 25th Street SE Cedar Rapids, IA 52403	Reimbursement for Campaign Expenses - See Attached Pads - Parade Candy- Shirts - Helium	2476.08
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 2770.68</b>

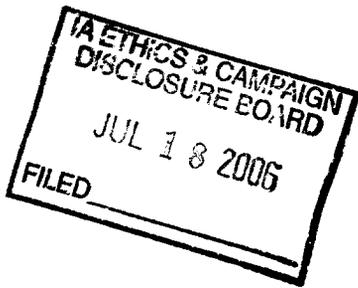
**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

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).)

**Itemized List of Reimbursed Expenses to Linda Palmer**  
**Check # 1227 / 7-10-06     \$2476.08**

6-16-06	Target	\$47.66	Candy for freedom festival parade
6-21-06	Fineline Printing	\$2087.93	Campaign pads
6-21-06	The Jym Bag	\$289.01	Campaign Shirts
6-23-06	CR Welding Supply	\$51.48	Helium for balloons / Parade
Total Amount Reimbursed:		\$2476.08	





FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE <b>F</b> (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
Committee to Elect Don Palmer

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 8393.90

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ 0

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II) \$ 0

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 8393.90

\*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 when it applies.

P. 9

319-366-1962

Tim Palmer