FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM	
DR-2 (Rev. 12/2005)	DISCLOSURE REPORT

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

POLLY BUKTA CAMPAIGN #975

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 Central Committee (7)School Board or Other Political Subdivision Candidate (8)City Candidate (9)City PAC (10)School Board or Other Political Subdivision PAC (11)Local Ballot Issue

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
MAY 17 2006
FILED fax

CANDIDATE COMMITTEES ONLY:

Candidate Name: MARY POLLY BUKTA

Political Party (if applicable): DEMOCRAT

Office Sought: STATE REPRESENTATIVE

District (if Senate or House): HOUSE

For Office Use Only
Comm. # 975
Logged SW
Scanned
Computer
Audited

File with:
Iowa Ethics and Campaign Disclosure Board
510 E. 12th, 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.

Cammie McGuire — SIGNATURE OF PERSON FILING REPORT

563-243-8460 — TELEPHONE

5-17-2006 — DATE SIGNED

I AM FILING A MAY 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.) $ 7,091.84

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 2,636.00

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 $ 9,727.84

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 3,292.64

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) $ 6,435.20

UNPAID BILLS (From Schedule D - Attach Schedule D) $ _____

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) $ _____

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) $ 1,500.00

CONSULTANT BREAKDOWN (Schedule G Attached?) ___ YES X 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

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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)* POLLY BUKTA CAMPAIGN #975

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
1/4/2006	ID# CK#	UNITEMIZED CONTRIBUTIONS	N/A	$25.00	✓
1/5/2006	ID# CK#	T.J. & MELODIE SCHUELLER 503 West Platt St. MAQUOKETA, IA 52060	N/A	$50.00	✓
1/5/2006	ID# CK#	JAMES & PATRICIA JUDGE 3544 220TH ST DEWITT, IA 52742	N/A	$50.00	✓
1/5/2006	ID# CK#	BRUCE OR KAYDEE INGHAM 203 CRAGMOR DRIVE CLINTON IA 52732	N/A	$55.00	✓
1/5/2006	ID# CK#	BRUCE L BRALEY P.O. BOX 810 WATERLOO, IA 50704	N/A	$100.00	✓
1/5/2006	ID# 80360 CK# 2554	ELECTRICAL WORKERS LOCAL 145 1700 52ND AVE., 071, A MOLINE, IL 61265	N/A	$250.00	✓
1/5/2006	ID# CK#	THOMAS C GIBBONS 707 8TH AVE S CLINTON IA 52732	N/A	$25.00	✓
1/5/2006	ID# CK#	ROGER & JENNIE STEWART 3936 317TH AVE PRESTON, IA 52069	N/A	$50.00	✓
1/5/2006	ID# CK#	RICHARD A O'LEARY 1008 BRIAR CLIFF LANE CLINTON IA 52732	N/A	$50.00	✓
1/5/2006	ID# CK#	ROBERT J OSTERHAUS 216 AUSTIN AVE MAQUOKETA, IA 52060-2802	N/A	$50.00	✓
			SUB-TOTAL	$705.00	
			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) (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.

For Instructions, See Back of Form

Revised Form

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

SCHEDULE A (Rev 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
POLLY BUKTA CAMPAIGN #975

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
1/5/2006	ID# CK#	CHARLES SHERIDAN 814 13TH AVE N APT 5C CLINTON IA 52732	N/A	$50.00	☑
1/5/2006	ID# CK#	THOMAS & JUDITH WICK 612 5TH AVE S CLINTON IA 52732	N/A	$25.00	☑
1/5/2006	ID# CK#	BARBARA M SUEHL 15391 EBSON ROAD FULTON IL 61252	N/A	$25.00	☑
1/5/2006	ID# CK#	DONAGENE HAWK 450 OAKHURST DR CLINTON IA 52732	N/A	$25.00	☑
1/5/2006	ID# CK#	UNITEMIZED CONTRIBUTIONS	N/A	$701.00	☑
1/6/2006	ID# 6432 CK# 1014	PLUMBERS & PIPEFITTERS LOCAL 25 4600 46TH AVE ROCK ISLAND, IL 61201	N/A	$200.00	☑
1/27/2006	ID# CK#	UNITEMIZED CONTRIBUTIONS	N/A	$30.00	☑
1/27/2006	ID# CK#	GARY L. HEATH 829 Gateway Ave Apt. 10 CLINTON IA 52732-3552	N/A	$30.00	☑
2/4/2006	ID# CK#	UNITEMIZED CONTRIBUTIONS	N/A	$20.00	☑
3/6/2006	ID# CK#	NORMA E. ROLING 2311 NORTH 5TH ST CLINTON IA 52732	N/A	$100.00	☐

SUB-TOTAL $1206.00

TOTAL (if last page of this schedule) $

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For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ 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)*
POLLY BUKTA CAMPAIGN #975

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
3/14/06	ID# CK#	HELEN C DOSE 814 13TH AVE N ZB CLINTON IA 52732-5150	N/A	$50.00	☐
3/14/06	ID# CK#	JANE B. PETERZEN 425 RUTH PLACE CLINTON IA 52732	N/A	$25.00	☐
5/10/06	ID# 6244 CK# 246	CLINTON LABOR CONGRESS P.O. BOX 461 CLINTON IA 52732	N/A	$500.00	☐
5/14/06	ID# 6060 CK# 2381	IA CMTE ON POLITICAL EDUC 2000 WALKER, SUITE A DES MOINES IA 50317	N/A	$150.00	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐

SUB-TOTAL $725.00

TOTAL *(if last page of this schedule)* $2636.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

COMMITTEE NAME *(Must be same as on Statement of Organization)*
POLLY BUKTA CAMPAIGN #975

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
1/4/2006	ID# CK#	U.S. CELLULAR P.O. BOX 0203 PALATINE, IL 60055-0203	CELL-PHONE PMT	$52.91
1/8/2006	ID# CK#	KROS RADIO 870 13TH AVE N CLINTON, IA 52732	ADVERTISEMENT FOR CHILI SUPPER FUND-RAISER	$80.00
1/19/2006	ID# CK#	CLINTON HERALD 221 6TH AVE S CLINTON, IA 52732	NEWSPAPER SUPPLEMENT FOR SURVEY OF IDEAS FOR CONSTIUENTS	$780.00
2/1/2006	ID# CK#	U.S. CELLULAR P.O. BOX 0203 PALATINE, IL 60055-0203	CELL-PHONE PMT	$52.91
2/13/2006	ID# CK#	CLINTON JAYCEES C/O STERLING FEDERAL 122 MAIN AVE CLINTON IA 52732	DONATION FOR USE OF FACILITY TO HOLD CHILI SUPPER	$50.00
2/20/2006	ID# CK#	CL AREA CHAMBER OF COMMERCE 333 4TH AVE S CLINTON IA 52732	ANNUAL DUES FOR MEMBERSHIP	$132.00
3/3/2006	ID# CK#	U.S. CELLULAR P.O. BOX 0203 PALATINE, IL 60055-0203	CELL-PHONE PMT	$52.91
3/5/2006	ID# CK#	HOUSE TRUMAN FUND IA DEMOCRATIC PARTY 5661 FLEUR DRWE DES MOINES IA 50321	CONTRIBUTION MADE TO STATE PARTY	$1,500.00
			SUB-TOTAL	$2,700.73
			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 56.6(3)(i).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

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

COMMITTEE NAME *(Must be same as on Statement of Organization)*
POLLY BUKTA CAMPAIGN #975

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
3/13/2006	ID# CK#	CLINTON HERALD 221 6TH AVE S CLINTON IA 52732	TO PUBLISH SURVEY RESULTS	$ 366.00
4/3/2006	ID# CK#	U.S. CELLULAR P.O. BOX 0203 PALATINE IL 60055-0203	CELL-PHONE PMT	$52.91
5/2/2006	ID# CK#	U.S. CELLULAR P.O. BOX 0203 PALATINE, IL 60055-0203	CELL-PHONE PMT	$ 53.00
5/10/06	ID# CK#	US POST OFFICE CLINTON, IA 52732	500 POST CARD STAMPS FOR FUNDRAISER MAILING	$ 120.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$591.91
			TOTAL *(if last page of this schedule)*	$3292.64

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)(l).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID

☐ CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
POLLY BUKTA CAMPAIGN #975

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD $ 1,500.00

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)* $ _____

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)* $ _____

From Schedule E -- TOTAL LOANS FORGIVEN $ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD $ 1,500.00

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Page 1 of 1
(for Schedule F)