FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

MAY 16 2006

FORM **DR-2** (Rev. 01/98)	DISCLOSURE REPORT

For Office Use Only
Comm. # 6044
Indexed SW
Audited
Computer

COMMITTEE NAME *(Must be same as on Statement of Organization)* pm 5/5
Hearing Aid Specialist Political Action Committee

IMPORTANT: Indicate type of committee you are reporting for: 2

(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee
(8)Support Slate of Candidates

Peggy Stephens — **SIGNATURE OF TREASURER (or person filing this report)**
(641) 424-1111 — **TELEPHONE**
5/15/06 — **DATE SIGNED**

Routine Penalties Due For Late Filed Reports Range from $20 to $800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A May 19, 2006 (report date) REPORT FOR AN/A **(1) ELECTION /(2)NON-ELECTION** YEAR.
Indicate one 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 Notice of Dissolution 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. (This is the total of all monies 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.) ..... $ 996.15

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) ..... —
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 ..... $ 996.15

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 16.05
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) ..... $ 980.10

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) ..... $ _____

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ____ YES ____ NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ _____

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)*
Hearing Aid Specialist Political Action Committee

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
1/9/06	ID# CK# Auto	Wells Fargo Bank Mason City, IA 50401	Mo. Service Chg	$ 3.21
2/7/06	ID# CK# Auto	Wells Fargo Bank Mason City, IA 50401	Mo. Service Chg	3.21
3/7/06	ID# CK# Auto	Wells Fargo Bank Mason City, IA 50401	Mo. Service Chg	3.21
4/7/06	ID# CK# Auto	Wells Fargo Bank Mason City, IA 50401	Mo. Service Chg	3.21
5/5/06	ID# CK# Auto	Wells Fargo Bank Mason City, IA 50401	Mo. Service Chg	3.21
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$
			TOTAL (*if last page of this schedule*)	$ 16.05

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)