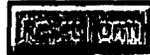


LATE

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



FORM <b>DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	9664
Logged In	KLS
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	

COMMITTEE NAME (Must be same as on Statement of Organization)  
Software and Information Technology of Iowa - SITIPAK

IMPORTANT: Indicate by # type of committee you are reporting for: 2  
(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 Candidate PAC (9) City Candidate PAC (10) School Board or Other Political  
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:  
Candidate Name: \_\_\_\_\_  
Office Sought: \_\_\_\_\_  
District (if Senate or House): \_\_\_\_\_

FILED  
JUL 21 2006  
IOWA ETHICS & CAMPAIGN  
DISCLOSURE BOARD

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]  
SIGNATURE OF PERSON FILING REPORT

515-245-7760  
TELEPHONE

7-19-06  
DATE SIGNED

I AM FILING A Ma, 19, 2006 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
(report date) Indicate by # 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

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.) .....\$ 652<sup>22</sup>

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below).....\$ 960<sup>00</sup>

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.....\$ ~~1612<sup>22</sup>~~ 1,612<sup>22</sup>

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).....\$ 1,509<sup>54</sup>

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).....\$ 102<sup>68</sup>

\*\*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).....\$ \_\_\_\_\_

CONSULTANT BREAKDOWN (Schedule G Attached?) \_\_\_\_\_ YES \_\_\_\_\_ 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



SCHEDULE	
<b>A</b>	MONETARY RECEIPTS
(Rev. 07/03)	
<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)

SITI-PAC

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.

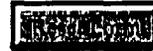
NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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/YYR)	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
1/9/06	ID# CK#	Cindy Buevink 1305 Broadway St. Pelee, IA 52241		\$ 21 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	James Brukvoort W477 Avelon Dr. Caledonia, MI 49316		21 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Rick Diana 527 Stebbins Dr. Apollo Beach, FL 33572		15 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Tosh Dillinger 2014 SW 32nd St. Dakota, IA 50001		15 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Steven Elbert 5215 S Snowbridge Pl. West Des Moines, IA 50266		105 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Lori Forsythe 1103 Park Lane Pelee, IA 52249		8 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Beverly Grace 2909 Jordan Circle West Des Moines, IA 50265		20 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Paul Hike 4333 Parkridge, Lot 44 Pleasant Hill, IA 50317		8 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Samuel Kolars 2201 NW Maple St. Dakota, IA 50001		19 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Shere Kos 700 NW Linden St. Dakota, IA 50001		21 <sup>00</sup>	<input type="checkbox"/>
SUB-TOTAL				\$ 253	
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



SCHEDULE <b>A</b> (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)  
**SITI-PAC**

**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/YY)	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
1/5/06	ID# CK#	Anna Lampe 8131 Durram Circle Johnston, IA 50131		\$20 <sup>00</sup>	<input type="checkbox"/>
1/5/06	ID# CK#	Mikolans 522 Champag, No Rd. Waukele, IA 50263		105 <sup>00</sup>	<input type="checkbox"/>
1/5/06	ID# CK#	Joshua Moore 4007 55th St. Des Moines, IA 50310		42 <sup>00</sup>	<input type="checkbox"/>
1/5/06	ID# CK#	Darwin Rowley 15140 Hawthornepcr. Clive, IA 50225		42 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Angele Sanger 1A E 12th St. Pella, IA 50219		4 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Rick Sanger 14507 Brookshire Dr. Urbandale, IA 50323		42 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Steven SIKKING 2125 40th St. Des Moines, IA 50310		105 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Steve Simpson 3516 Ashwood Dr. Urbandale, IA 50322		21 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Rick Slinger 490 Becky Lynn Blvd. Pleasant Hill, IA 50327		21 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Linda Snyder 5407 SE 28th Ct. Des Moines, IA 50320		21 <sup>00</sup>	<input type="checkbox"/>
SUB-TOTAL				\$ 423	
TOTAL (If last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (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)  
**STT - PAC**

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
1/9/06	ID# CK#	Brad Taylor 1005 97th St. West Des Moines IA 50266		\$ 42 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Lyle Van Wyngarden 1410 Springs Dr. Parsent Hill IA 50227		32 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Craig Werner 108 Bennybrook Dr. Grimes, IA 50111		105 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Lisa Whitaker 516 78th St. West Des Moines IA 50266		20 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Brad Wilford 113 NE Bel-Aire Rd Ankeny, IA 50021		42 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Thomas Blair 1012 E 36th Ct. Des Moines, IA 50317		15 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Jeffrey Mark 119 E 12th St. Pella, IA 50219		3 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	J.S. Robertson 113 NE Bel-Aire Rd. Ankeny, IA 50021		15 <sup>00</sup>	<input type="checkbox"/>
1/9/06	ID# CK#	Brent Russell 113 NE Bel-Aire Rd. Ankeny, IA 50021		10 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

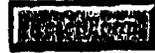
SUB-TOTAL

\$ 284  
\$ 960

TOTAL (if last page of this schedule)

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FOR INSTRUCTIONS, SEE BACK OF 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)  
**SITI - PAC**

DATE EXPENDED (MM/DD/YYR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11/7/06	ID# 28 CK# 1508	Murphy for State Rep.	Contribution	\$250 <sup>00</sup>
11/7/06	ID# 100 CK# 1509	Gipp for Rep	Contribution	250 <sup>00</sup>
11/6/06	ID# 50 CK# 1511	Citizens for Brunstel	Contribution	500 <sup>00</sup>
11/6/06	ID# 05 CK# 1512	Iverson for Senato	Contribution	500 <sup>00</sup>
1-4-06 to 5-14-06	ID# CK#	Wells Fargo Bank 600 Walnut St. Des Moines IA 50309	Bank charges	954
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$1,509<sup>54</sup>  
TOTAL (if last page of this schedule) \$1,509<sup>54</sup>

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 detailed 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 88A.402(3)(f).)