

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)
Union Council AFL-CIO Political Education Fund #25050
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 PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue
CANDIDATE COMMITTEES ONLY:
Candidate Name Political Party (if applicable)
Office Sought District (if Senate or House)

FORM DR-2 DISCLOSURE REPORT
(Rev 12/2005)
For Office Use Only
Comm. # 9725
Logged in [initials]
Scanned
Computer
Audited
File with:
Iowa Ethics and Campaign Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-3701

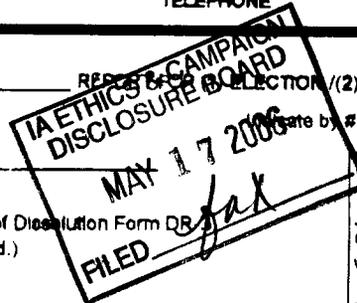
Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT [Signature]

TELEPHONE 319-232-2484

DATE SIGNED 5-17-06

I AM FILING A May 19 (report date)



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

Table with 2 columns: Description and Amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$36.65), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 743.53, Schedule F: Loans Received total, Schedule H: Total Sales of Campaign Property), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: Expenditures total 607.66, Schedule F: Loan Repayments total), CASH ON HAND at the end of this reporting period (\$172.52).

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.

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**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)  
 Union Council AFL-CIO Political Education Fund #25050-

**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 \$780 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B 32A(8), 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
5/1/06	ID# CK#	1/2 cents Per Capita Per Member Per Month 2 cents Per Capita Per Member Per Month		\$743.53	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 743.53	
<b>TOTAL (If last page of this schedule)</b>				\$ 743.53	

\* 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.

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE</b> <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.

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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
5/01/06	ID# CK# 2002	1st District COPE - Dubuque Iowa 2 cents per member per month		\$ 594.82
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 594.82</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 594.82</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 86A.402(3)(i).)