

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE



<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	<u>890</u>
Logged In	<u>S</u>
Scanned	
Computer	
Audited	

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

Nancy Boettger for State Senate Committee  
7006 01000 0003 3737 3824

**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 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

Nancy Boettger

Political Party (if applicable)

R

Office Sought

State Senator

District (if Senate or House)

29

Late reports are subject to possible civil and criminal penalties.

Nancy Boettger

**SIGNATURE OF PERSON FILING REPORT**

712-744-3290  
**TELEPHONE**

10/14/06  
**DATE SIGNED**

I AM FILING A

Oct. 19, 2006

(report date)

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

Indicate by #  1

CHECK IF AMENDMENT TO REPORT DATED

OCT 20 2006  
FILED 10-14

Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until the 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.)

\$ 6013.01

### ADD TOTAL MONEY TAKEN IN THIS PERIOD

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

10527.93

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 .....

\$ 16540.94

### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

5314.75

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)

\$ 11226.19

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 4022.46

\*\*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)

\$ 0

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)  
*Nancy Boettger for State Senate Com.*

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/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
7/17/06	ID# 6237 CK# 1828	ABATE PAC 48 Jim West 601 Highland Acres Rd. Marshalltown, Ia. 50158-2383		\$ 250.00	<input type="checkbox"/>
7/26/06	ID# 6063 CK# 2030	Ia. Dental Assoc. PAC 5530 West Parkway St. 100 Johnston, Ia. 50131		1000.00	<input type="checkbox"/>
8/2/06	ID# 6073 CK# 929	Ia Medical PAC 1001 grand ave W. Des Moines Ia 50265-3502		500.00	<input type="checkbox"/>
8/3/06	ID# CK# 1301	Robt Myers 6600 Westown Pkwy West Des Moines Ia. 50266		125.00	<input type="checkbox"/>
8/3/06	ID# CK# 1538	Linda Myers Revocable Trust 6600 Westown Pkwy West Des Moines Ia. 50266		125.00	<input type="checkbox"/>
8/3/06	ID# CK# 1375	Michael Medwed 6600 Westown Pkwy West Des Moines Ia. 50266		125.00	<input type="checkbox"/>
8/3/06	ID# CK# 1299	Jane Myers 6600 Westown Pkwy West Des Moines Ia. 50266		125.00	<input type="checkbox"/>
8/9/06	ID# 6116 CK# 1326	Political Action - Iowa Dealers P.O. Box 65840 West Des Moines Ia. 50265		150.00	<input type="checkbox"/>
8/9/06	ID# 6070 CK# 3312	Iowa LAW PAC 521 E Locust St. 71.3rd Des Moines, Ia. 50309-1937		250.00	<input type="checkbox"/>
8/14/06	ID# 6498 CK# 1478	Well Pac 636 grand ave ste 113 Des Moines Ia. 50309		500.00	<input type="checkbox"/>
SUB-TOTAL				\$ 3150.00	
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). 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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**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)  
*Nancy Boettger for State Senate Com.*

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8/21/06	ID# CK# 2878	Alan Campbell 422 7 Main St. P.O. Box 346 Elk Horn, Ia. 51531		\$100.00	<input type="checkbox"/>
8/21/06	ID# CK# 4686	JANICE MORGAN 801 Cedar Adair, Ia. 50002		75.00	<input type="checkbox"/>
8/21/06	ID# CK# 1591	Kristen Canham 3462 Scenic Vista Dr. West Des Moines, Ia. 50265		25.00	<input type="checkbox"/>
8/21/06	ID# CK# 1029	Steve Fister 723 Co. T Rd Blayton, Ia. 50042		100.00	<input type="checkbox"/>
8/21/06	ID# CK# 2199	Mary Jane Ventucher 6323 Panorama Dr. Panora, Ia. 50216		100.00	<input type="checkbox"/>
8/21/06	ID# CK# 3392	Steven Ackerson 1634 NW 131st St. Clive, Ia. 50325		100.00	<input type="checkbox"/>
8/21/06	ID# 6067 CK# 3511	Iowa Health PAC 6750 Westown Plany#100 West Des Moines, Ia. 50266		500.00	<input type="checkbox"/>
8/21/06	ID# 6155 CK# 004449	Iowans for Tax Relief PAC P.O. Box 209 Muscatine, Ia. 52761-0069		100.00	<input type="checkbox"/>
8/30/06	ID# 6291 CK# 2456	IHA PAC 100 E. Grand Ste 100 Des Moines, Ia. 50309		500.00	<input type="checkbox"/>
8/30/06	ID# CK# 611560	Craig Nielsen 8620 Titterist Circle Las Vegas, Nev. 89117		200.00	<input type="checkbox"/>
SUB-TOTAL				\$1808.00	
TOTAL (if last page of this schedule)				\$	

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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)

*Nancy Boettger for State Senate Com.*

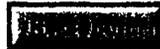
STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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9/1/06	ID# 6007 CK# 4425	Assoc Gen. Contractors of Ia PAC 701 E. Court Ave, Des Moines, Ia 50309-7901		\$ 1500.00	<input type="checkbox"/>
9/1/06	ID# 6059 CK# 2901	ICAR 1111 Office Park Rd W. Des Moines, Ia 50265		250.00	<input type="checkbox"/>
9/10/06	ID# 890 CK# 1032	MuniPac 1735 NE 70th St Ankeny, Ia. 50021-9358		100.00	<input type="checkbox"/>
9/15/06	ID# 9740 CK# 1010	Iowa Corn Growers Assoc. PAC 5505 NW 88th St Ste 100 Johnston, Ia. 50131		500.00	<input type="checkbox"/>
9/15/06	ID# 6082 CK# 1220	Mid Amer. Energy Effective group 666 Grand Ave Polk Des Moines Ia. 50303		250.00	<input type="checkbox"/>
9/15/06	ID# CK# 5731	T. Newman 2831 Dogwood Ave. Adair, Ia. 50002		25.00	<input type="checkbox"/>
9/15/06	ID# CK# cash	Jon & Rita King 904 Grand St Guthrie Center, Ia 50115		40.00	<input type="checkbox"/>
9/15/06	ID# CK# 2015	Ed Friedman P.O. Box C Redfield, Ia. 50233		100.00	<input type="checkbox"/>
9/15/06	ID# 6062 CK# 255	Ia. EPA PAC 950 Office Park Rd. Ste 300 West Des Moines, Ia. 50265		200.00	<input type="checkbox"/>
10/5/06	ID# 6098 CK# 3445	Iowa Beer PAC 321 E. Walnut Ste. 310 Des Moines, Ia. 50309-2026		350.00	<input type="checkbox"/>
SUB-TOTAL				\$3315.00	
TOTAL (if last page of this schedule)				\$	

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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)

*Nancy Boettger for State Senate Com.*

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10/5/06	ID# 6282 CK# 001636	Hy Ueasche Employees PAC 5820 Westown Phwy West Des Moines, IA 50266-8222		\$ 250.00	<input type="checkbox"/>
10/5/06	ID# CK# 1028	Dick + Carolyn Koberg 4653 Panorama Dr. Panora, IA 50216		100.00	<input type="checkbox"/>
10/5/06	ID# 6234 CK# 084129	Iowa Foundation PAC 5400 University Ave West Des Moines, IA 50266-5997		100.00	<input type="checkbox"/>
10/5/06	ID# 6069 CK# 2359	11 PAC 904 Walnut St. 100 Des Moines, IA 50309-3503		500.00	<input type="checkbox"/>
10/5/06	ID# 6064 CK# 2060	Iowa F.O. R.E. 8525 Douglas St. 48 Des Moines, IA 50322		100.00	<input type="checkbox"/>
10/5/06	ID# CK# 5885	Doug Gronau 3245 K. Ave Vail, IA 51465-7550		25.00	<input type="checkbox"/>
10/5/06	ID# 000235737 CK# 8726	BNSF Rail PAC 200 13th St. NW 220 Washington, DC 20005		500.00	<input type="checkbox"/>
10/10/06	ID# CK# 1989	Lucia + Owen Shunkwiler 12300 Tanglewood Dr. Urbandale, IA 50323-2358		100.00	<input type="checkbox"/>
10/10/06	ID# 6486 CK# 1599	Iowa Telecom PAC 115 S. 2nd Ave W. Newton, IA 50208		200.00	<input type="checkbox"/>
10/11/06	ID# 9161 CK# 22823	Republican Party of Iowa 621 E. 9th St. Des Moines, IA 50309		380.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2255.00	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
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**CONTRIBUTIONS – MONEY TAKEN IN**  
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Nancy Boettger for State Senate Com.*

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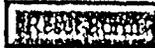
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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
8/10/06	ID# CK#	<i>Interest on Checking</i> <i>Shelby Co State Bank</i> <i>P.O. Box 29</i> <i>Harlan Ia 51537</i>		\$ 2.28	<input type="checkbox"/>
9/10/06 <sup>08</sup>	ID# CK#	<i>Shelby Co State Bank</i> <i>P.O. Box 29</i> <i>Harlan Ia 51537</i>		2.20	<input type="checkbox"/>
10/10/06	ID# CK#	<i>Shelby Co State Bank</i> <i>P.O. Box 29</i> <i>Harlan Ia 51537</i>		3.45	<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"/>
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	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL \$ 7.93  
TOTAL (if last page of this schedule) \$ 10527.93

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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)  
*Nancy Boettger for State Senate Committee*

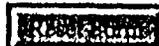
DATE EXPENDED (MM/DD/YYR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
7/15/06	ID# CK# 910	Treasurer State of Iowa Statehouse Des Moines, Ia 50319	3 official records for campaign work	\$ 39.00
7/17/06	ID# CK# 911	Bro Business 2309 A Chalfourn Harlan, Ia. 51537	address labels	21.82
8/2/06	ID# CK# 912	Verizon Wireless P.O. Box 25506 Lehigh, Pa. 18002	cell phone	39.40
	ID# CK#			
SUB-TOTAL				\$ 100.22
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 68A.402(3)(I).)

FOR INSTRUCTIONS, SEE BACK OF 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.

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

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

*Nancy Boettger for State Senate Committee*

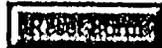
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/3/06	ID# CK# 913	Dave Boettger 926 Ironwood Rd Harlan, Ia 51537	Mileage 1/2/03 - 12/31/03	\$2648.26
8/6/06	ID# CK# 914	Sarah Moore 3399 S. ave Adel, Ia. 50003	secretarial services + stamps \$80	260.00
8/22/06	ID# CK# 915	Verizon 10 Jordan Creek Hwy West Des Moines, Ia	battery for cell phone	26.47
8/26/06	ID# CK# 916	Sarah Moore 3399 S. ave Adel, Ia. 50003	Secretarial Services	120.00
9/8/06	ID# CK# 917	Verizon Wireless P.O. Box 25506 Lehigh, Pa. 18002	cell phone service	39.40
9/8/06	ID# CK# 918	Ia. Pork Producers P.O. Box 71009 Clive, Ia. 50325	10 \$10 pork certificates for fair both drawings	100.00
9/15/06	ID# CK# 919	Dave Boettger 926 Ironwood Rd Harlan, Ia. 51537	Mileage reimbursement 11/1/04 - 12/31/04	1836.00
9/16/06	ID# CK# 920	St. Mary's church Potosi, Ia. 51565	church dinner event	15.00
SUB-TOTAL				\$2985.13
TOTAL (if last page of this schedule)				\$

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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).)

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	

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*Nancy Boettger for State Senate 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
9/22/06	ID# CK# 921	Iowa State Univ Republican Memorial Union Ames, Iowa 50010	candidate event	\$ 70.00
9/30/06	ID# CK# 922	Sarah Moore 3399 S. ave Adel, Ia. 50003	secretarial services	120.00
10/5/06	ID# CK# 923	Verizon Wireless PO Box 25506 Lehigh, Pa. 18002	cell phone	39.40
	ID# CK#			
SUB-TOTAL				\$ 229.40
TOTAL (if last page of this schedule)				\$ 5314.75

**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).)

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Nancy Boettger for State Senate Committee*

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
 (DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
1/1/05- 12/13/05	David Boettger 926 Ironwood Rd - Harlan, Ia. 51537	Mileage reimburse 6080 miles @ .405	\$ 2462.40
6/1/06- 7/14/06	David Boettger 926 Ironwood Rd Harlan, Ia. 51537	Mileage reimburse 1132 mile @ .405	458.46
7/15/06- 10/14/06	David Boettger 926 Ironwood Rd Harlan, Ia. 51537	Mileage reimburse 2720 miles @ .405	1101.60

SUB-TOTAL \$ 4022.46

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD \$ 4022.46

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**  
 \*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.