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DISCLOSURE SUMMARY PAGE

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

Citizens for Zirkelbach

STATE ETHICS AND CAMPAIGN DISCLOSURE BOARD

OCT 20 2006

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 PAC (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name: *Raymond Zirkelbach* Political Party (if applicable): *Democratic*
Office Sought: *State House of Representatives* District (if Senate or House): *31*

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	1535
Comm. #	<i>5</i>
Logged In	<i>6</i>
Scanned	
Computer	
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th 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 TELEPHONE DATE SIGNED

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

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.)	\$	<u>5,230.78</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		<u>1,490.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0</u>
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	<u>6,720.78</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>5,004.50</u>
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)	\$	<u>1,716.28</u>

**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

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SCHEDULE A (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)
Citizens for Zinke/Back

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
8/2/06	ID# CK# 2120	All American PAC 607 14th Street NW, Suite 800 Washington, DC 20005		\$ 500.00	<input type="checkbox"/>
8/9/06	ID# CK#	John + Janet Fraser 5 Spring Farm Ln Monticello, IA 52310		25.00	<input checked="" type="checkbox"/>
8/12/06	ID# CK#	Harlan + Carol Helgens 13974 Co. Rd. E17 Monticello, IA 52310		50.00	<input checked="" type="checkbox"/>
8/16/06	ID# CK#	Leo + Janet Cook 21435-175th Ave. Monticello, IA 52310		85.00	<input checked="" type="checkbox"/>
8/16/06	ID# CK#	Judy Huntsberger 503 Lincoln Dr. Monticello, IA 52310		25.00	<input checked="" type="checkbox"/>
8/18/06	ID# CK#	David + Beverly Hannon 6049-180th Ave. Anamosa, IA 52205		20.00	<input checked="" type="checkbox"/>
8/18/06	ID# CK#	Joseph + Diane Hickey 3265 Kaufmann Ave. Dubuque, IA 52001		10.00	<input checked="" type="checkbox"/>
8/18/06	ID# CK#	Denise Dolan 2830 Oak Meadow Ct. Dubuque, IA 52003		25.00	<input checked="" type="checkbox"/>
8/18/06	ID# CK#	Robert Brown 603 S. Birch Ridge Peosta, IA 52078		25.00	<input checked="" type="checkbox"/>
8/18/06	ID# CK#	Willa Jean Bliss 15673-35th St. Olin, IA 52330		100.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 805.00	
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.

For Instructions, See Back of Form

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SCHEDULE A (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)
Citizens for Zirkelbach

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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8/18/06	ID# CK#	Wayne + Joan Demmer 9502 Lone Pine Rd. Edworth, IA 52045		\$ 50.00	<input checked="" type="checkbox"/>
8/18/06	ID# CK#	Joan + Rudolph Bellmann 1000 Richards Rd. Dubuque, IA 52003		10.00	<input checked="" type="checkbox"/>
8/19/06	ID# CK#	Cecil Groetsch 205 Leigo Ave. PO Box 603 Monticello, IA 52310		25.00	<input checked="" type="checkbox"/>
8/25/06	ID# CK#	Todd + Anice Hospodarsky 21087 Ridgeview Dr. Monticello, IA 52310		25.00	<input checked="" type="checkbox"/>
9/7/06	ID# 6073 CK# 1016	FLOW Medical PAC 1001 Grand Ave. West Des Moines, IA 50265		100.00	<input type="checkbox"/>
9/12/06	ID# CK#	Dale and Joan Hackett 1701-130th St., #105 Anamosa, IA 52205		25.00	<input type="checkbox"/>
8/5/06	ID# 6082 CK# 1214	Mid American Energy Co. Effective Gov. Committee 1600 Grand Ave., P.O. Box 657 Des Moines, IA 50303		250.00	<input type="checkbox"/>
9/28/06	ID# 8086 CK# 10727	IBEW Educational Committee 900 Seventh St. NW Washington, D.C. 20001		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 685.00	
TOTAL (if last page of this schedule)				\$ 1490.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
Citizens for Zirkelbach

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
8/1-10/1	ID# CK#	Tri-County Bank S. Main Monticello, IA 52310	Checking Account Fee	\$ 4.50
9/7/06	ID# CK#	Iowa Democratic Party 5101 Fleur Drive Des Moines, IA 50321	Donation to House Truman Fund	5,000.00
	ID# CK#			
SUB-TOTAL				\$ 5,004.50
TOTAL (if last page of this schedule)				\$ 5,004.50

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)(f).)