

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1675
Logged In	
Scanned	
Computer	
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

MAXINE BUSSANMAS FOR STATE REP.

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: MAXINE R. BUSSANMAS Political Party (if applicable): DEMOCRAT
 Office Sought: IOWA STATE REPRESENTATIVE #23 District (if Senate or House):

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 Maxine R. Bussanmas

515-462-3305 TELEPHONE

11/03/06 DATE SIGNED

I AM FILING A OCT. 31, 2006 (report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR. Indicate by # 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 DR-3 is filed.)

NOV 3 2006 FAX stamp

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.)	\$	773.13
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		1,776.00
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	\$	2,549.13
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		965.00
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)	\$	1,584.13
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	245.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	2,000.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES	X 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

SfftuGpn

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)
MAXINE BUSSANMAS FOR STATE REP.

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/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
10/15/06	ID# CK#	CATHERINE BUSSANMAS 2372 ILLINOIS ST. PROLE, IA 50229	SISTER- IN-LAW	\$ 100.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	KAY MIDDLESWART 105 N. KENWOOD BLVD. INDIANOLA, IA 50125		50.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	BARBARA PFEIFFER 2747-305th ST. PERU, IA 50222		25.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	AUSTIN KENNEDY 650-16th ST. APT. 309 DES MOINES, IA 50314-1626		50.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	PAULEE LIPSMAN 2880 GRAND AVE #106 DES MOINES, IA 50312		50.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	JAMES QUILTY 814-12th STREET DES MOINES, IA 50314		50.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	BRYAN TINGLE 418-6th AVE. STE. 200 DES MOINES, IA 50309		100.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	STACI WILDEBOUR APPEL 10901-180th AVE. ACKWORTH, IA 50001		250.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	G. KEVIN MIDDLESWART 7283 ILLINOIS ST. INDIANOLA, IA 50125		100.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	JOANNE WALTON 1027 ANGELA DR. INDIANOLA, IA 50125		50.00 CHECK	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 825.00	
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

Sf/fuGsh

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)
MAXINE BUSSANMAS FOR STATE REP.

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/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
10/15/06	ID# CK#	JO OLDSO 418-38th PL. DES MOINES, IA 50315	X	\$ 50.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	JACK BUSSANMAS 430-50th AVE. NORWALK, IA 50211	BROTHER IN-LAW	50.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	ANNA FROHLING 19342-20th AVE. ST. CHARLES, IA 50240-9124	X	50.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	MARGE KING 4496 KEOKUK ST. PROFE, IA 50229	X	25.00 CHECK	<input checked="" type="checkbox"/>
10/17/06	ID# CK#	GERALD CRAWFORD 1201 RYAN CENTER DES MOINES, IA 50309	X	250.00 CHECK	<input checked="" type="checkbox"/>
10/15/06	ID# CK#	UNITEMIZED CASH	X	96.00 CASH	<input checked="" type="checkbox"/>
10/19/06	ID# CK#	DALLAS COUNTY DEMOCRATS-ADEL	X	280.00 CHECK	<input type="checkbox"/>
10/24/06	ID# CK#	NICHOLAS C. BEK 2745-235th ST. ST. CHARLES, IA 50240	X	50.00 CHECK	<input type="checkbox"/>
10/27/06	ID# CK#	PATRICK F. CORKREAN 219 N. 8th AVE. WINTERSET, IA 50223	X	100.00 CHECK	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$951.00
\$1776.00

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

Reset Form

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)
MAXINE BUSSANMAS FOR STATE REP.

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
10/26/06	ID# CK#	INDIANOLA RECORD HERALD 1801 W. 2 ND AVE ST. #2 INDIANOLA, IA 50025	AD	\$ 375.00 CK# 1020
10/26/06	ID# CK#	DALLAS COUNTY NEWS P.O. BOX 190 ADEL, IA, 50003	AD	372.00 CK# 1021
10/28/06	ID# CK#	REDFIELD DEVELOPMENT COMMITTEE REDFIELD, IA 50238	AD	50.00 CK# 1022
10/28/06	ID# CK#	CARLISLE CITIZEN 210 S. 1 ST ST. CARLISLE, IA 50047	AD	84.00 CK# 1023
10/28/06	ID# CK#	NORTH WARREN TOWN E COUNTY NEWS 1325 SUNSET DR. NORWALK, IA 50211	AD	84.00 CK# 1024
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 965.00
TOTAL (if last page of this schedule)				\$ 965.00

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAYED
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
MAXINE BUSSANMAS FOR STATE REP.

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 2,000.00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (if Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E - TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 2,000.00

*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 when it applies.

Page 1 of 1
(for Schedule F)

FROM : BUSSANMAS
PHONE NO. : 515 462 4413
Nov. 03 2006 04:12PM P7