

**DISCLOSURE SUMMARY PAGE**

Reset Form  
 IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD  
 NOV 3 2006  
 FILED PM 11-2

<b>FORM DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	887
Logged In	<i>[Signature]</i>
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)

FOEGE FOR CITIZENS #887

IMPORTANT: Indicate by # type of committee you are reporting for: 1  
 ( 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 ROMAINE FOEGE	Political Party (if applicable) DEMOCRATIC
Office Sought STATE REPRESENTATIVE	District (if Senate or House) 29

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

(319) 895-6001  
 TELEPHONE

Nov. 3, 2006  
 DATE SIGNED

I AM FILING A OCTOBER 31, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) 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.)

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 <b>MUST</b> 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>29,744.63</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>7,105.00</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>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
<b>SUB-TOTAL</b>	\$	<u>36,849.63</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>23,613.94</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>13,235.69</u>

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>0</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>

CONSULTANT BREAKDOWN (Schedule G Attached?)  YES  NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 0

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

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)  
FOEGE FOR CITIZENS #887

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**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.

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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
10/16/06	ID# CK#	CAROL DILLARD 405 S 3RD ST WEST MOUNT VERNON, IA 52314		\$50.00	<input type="checkbox"/>
10/16/06	ID# CK#	PATRICIA SCHULTZ 1980 ELM RIDGE RD NE NORTH LIBERTY, IA 52317		50.00	<input type="checkbox"/>
10/16/06	ID# CK#	SUZETTE ASTLEY 703 5TH AVENUE N MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
10/16/06	ID# CK#	RICHARD WENZEL 4007 HICKORY HILL LANE SE CEDAR RAPIDS, IA 52403		100.00	<input type="checkbox"/>
10/16/06	ID# CK#	PAT OUVERSON 1219 33RD ST SE CEDAR RAPIDS, IA 52403		50.00	<input type="checkbox"/>
10/16/06	ID# CK#	BERNITA ROZINEK 2314 BIG BEND ROAD ELY, IA 52227		50.00	<input type="checkbox"/>
10/16/06	ID# CK#	JON KINNAMON 2620 BLUFFWOOD CIR IOWA CITY, IA 52245		100.00	<input type="checkbox"/>
10/16/06	ID# CK#	EUNICE HOFMEYER PO BOX 42504 URBANDALE, IA 50323	SISTER	50.00	<input type="checkbox"/>
10/20/06	ID# CK#	SALLY STUTSMAN 3114 South St. SW RIVERSIDE, IA 52327		25.00	<input type="checkbox"/>
10/20/06	ID# CK#	NANCY RILEY 5300 LAKESIDE ROAD MARION, IA 52302		250.00	<input type="checkbox"/>
SUB-TOTAL				\$ 750.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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(Including candidate's personal funds)

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10/20/06	ID# CK#	JEAN STONER 361 12TH AVE S, UNIT 8 MOUNT VERNON, IA 52314		\$25.00	<input type="checkbox"/>
10/20/06	ID# CK#	JON FOEGE 2315 GRAND CYPRESS CT NAPLES, FL 34119	SON	50.00	<input type="checkbox"/>
10/20/06	ID# CK#	CLAIRE LICHT 1994 VALLEY VIEW DR NE NORTH LIBERTY, IA 52317		50.00	<input type="checkbox"/>
10/20/06	ID# CK#	KATHY ENO 365 ABBOTSFORD RD CEDAR RAPIDS, IA 52403		50.00	<input type="checkbox"/>
10/20/06	ID# CK#	N HUMPHREY 2020 CARDINAL LANE NE NORTH LIBERTY, IA 52317		100.00	<input type="checkbox"/>
10/20/06	ID# CK#	CAROLYN WARKENTIN 3052 MEADOW ROAD NE NORTH LIBERTY, IA 52317		50.00	<input type="checkbox"/>
10/20/06	ID# CK#	STEVE SOVERN 2001 CARDINAL LANE NORTH LIBERTY, IA 52317		100.00	<input type="checkbox"/>
10/20/06	ID# CK#	CHARLES BRUNER 1148 OKLAHOMA AMES, IA 50014		50.00	<input type="checkbox"/>
10/20/06	ID# CK#	VINCE THOMAS 413 3RD ST SW MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
10/20/06	ID# CK#	SARA GAARDE 102 LINCOLN DR MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 525.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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(Including candidate's personal funds)

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10/20/06	ID# CK#	HAROLD DENDURENT 718 8TH AVE NORTH MOUNT VERNON, IA 52314		\$30.00	<input type="checkbox"/>
10/20/06	ID# CK#	DONALD GALLAGHER 1145 LINN RIDGE RD MOUNT VERNON, IA 52314		50.00	<input type="checkbox"/>
10/20/06	ID# CK#	JAMES JACKSON 380 12TH AVE S MOUNT VERNON, IA 52314		50.00	<input type="checkbox"/>
10/20/06	ID# CK#	ANN STONER 1621 MUSEUM RD MOUNT VERNON, IA 52314		200.00	<input type="checkbox"/>
10/20/06	ID# CK#	MARGARET WILLEMS 461 HIGHWAY 1 WEST, #25 IOWA CITY, IA 52246		25.00	<input type="checkbox"/>
10/20/06	ID# CK#	PATRICK MURPHY 155 NORTH GRANDVIEW AVE DUBUQUE, IA 52001		25.00	<input type="checkbox"/>
10/20/06	ID# CK#	THOMAS WIESELER 406 PALISADES RD MOUNT VERNON, IA 52314		75.00	<input type="checkbox"/>
10/20/06	ID# CK#	PAUL MCANDREW 2590 HOLIDAY ROAD, SUITE 100 CORALVILLE, IA 52241		50.00	<input type="checkbox"/>
10/20/06	ID# CK#	CHRISTINE GOODWIN 109 2ND STREET SW MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
10/20/06	ID# <b>C00399725</b> CK# 1152	MEDIMMUNE PAC 1 MEDIMMUNE WAY GAITHERSBURG, MD 20878		100.00	<input type="checkbox"/>

SUB-TOTAL

\$ **630.00**  
\$

TOTAL (if last page of this schedule)

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Reset Form

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(Including candidate's personal funds)

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10/20/06	ID# 8140 CK# 4024	PFIZER PAC 235 EAST 42ND STREET NEW YORK, NY 10017		\$200.00	<input type="checkbox"/>
10/20/06	ID# CK#	ELIZABETH GIBSON 109 10TH AVE SW MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
10/23/06	ID# CK#	NORMAN ARONS 4611 DOE RUN DR CEDAR RAPIDS, IA 52411		25.00	<input type="checkbox"/>
10/23/06	ID# CK#	SCOTT PETERSON 319 3RD ST SE MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
10/23/06	ID# CK#	KATRINA GARNER 800 1ST ST WEST MOUNT VERNON, IA 52314		50.00	<input type="checkbox"/>
10/23/06	ID# CK#	MARK SCHNEIDER 1085 GINKGO AVE WELLMAN, IA 52356		100.00	<input type="checkbox"/>
10/24/06	ID# CK#	DANIEL BRAWNER 807 W MAIN LISBON, IA 52253		40.00	<input type="checkbox"/>
10/24/06	ID# 6044 CK# 1024	HEARING AID SOCIETY PAC 1001 OFFICE PARK RD, SUITE 105 WEST DES MOINES, IA 50265		75.00	<input type="checkbox"/>
10/24/06	ID# CK#	MARSHA ACORD 312 5TH AVE NW MOUNT VERNON, IA 52314		20.00	<input type="checkbox"/>
10/24/06	ID# CK#	EDWARD SAUNDERS 660 AVALON PL CORALVILLE, IA 52241		100.00	<input type="checkbox"/>

SUB-TOTAL

\$ 660.00
\$

**TOTAL (if last page of this schedule)**

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10/24/06	ID# CK#	PATRICIA IKAN 601 GREEN ACRES DR SOLON, IA 52333		\$200.00	<input type="checkbox"/>
10/24/06	ID# 9694 CK# 9143	CR PHYSICIAN HOSPITAL ORG PAC 1500 SECOND AVE SE, SUITE 205 CEDAR RAPIDS, IA 52403		500.00	<input type="checkbox"/>
10/24/06	ID# CK#	WALTER MCNAMARA 4403 FIRST AVENUE SE CEDAR RAPIDS, IA 52402		100.00	<input type="checkbox"/>
10/27/06	ID# 6492 CK# 1031	SEIU LOCAL 199 VOTER ED FUND 102 2ND AVENUE CORALVILLE, IA 52241		500.00	<input type="checkbox"/>
10/27/06	ID# CK#	GLEN MISKA 4212 DALEWOOD AVENUE SE CEDAR RAPIDS, IA 52403		25.00	<input type="checkbox"/>
10/27/06	ID# CK#	LAURA KROUSE 825 ABBE HILLS ROAD MOUNT VERNON, IA 52314		30.00	<input type="checkbox"/>
10/27/06	ID# CK#	LINDA HALSEY 419 N 3RD ST W MOUNT VERNON, IA 52314		100.00	<input type="checkbox"/>
10/27/06	ID# CK#	ANNE TAYLOR 302 LINDEN TERRACE, SE CEDAR RAPIDS, IA 52403		100.00	<input type="checkbox"/>
10/27/06	ID# CK#	LARRY BARTLETT 2688 HIDDEN VALLEY TRL NE SOLON, IA 52333		100.00	<input type="checkbox"/>
10/27/06	ID# CK#	DAVID STEEN 16 BRIAR RIDGE DR NE IOWA CITY, IA 52240		35.00	<input type="checkbox"/>

SUB-TOTAL  
\$ 1690.00  
TOTAL (If last page of this schedule)  
\$

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(Including candidate's personal funds)

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10/27/06	ID# CK#	MICHELLE HERMAN BOX 8 NEW PROVIDENCE, IA 50206		\$10.00	<input type="checkbox"/>
10/27/06	ID# CK#	DAVID VANNINGEN 1802 9TH ST ROCK VALLEY, IA 51247		20.00	<input type="checkbox"/>
10/27/06	ID# CK#	DUANE OBBINK 3021 FILMORE AVE ROCKVALLEY, IA 51247		20.00	<input type="checkbox"/>
10/27/06	ID# CK#	ANNE GRUENEWALD 1412 ARTHUR DR AMES, IA 50010		25.00	<input type="checkbox"/>
10/27/06	ID# CK#	THOMAS LAZIO 2301 N COURT ST OTTUMWA, IA 52501		25.00	<input type="checkbox"/>
10/27/06	ID# CK#	STEVEN OVEL 2259 WASHINGTON AVE SE CEDAR RAPIDS, IA 52403		50.00	<input type="checkbox"/>
10/27/06	ID# CK#	MICHAEL STARCEVICH 6401 KIRKWOOD BLVD SW CEDAR RAPIDS, IA 52404		50.00	<input type="checkbox"/>
10/27/06	ID# CK#	MERRILL SMALLEY 2959 270TH ST NE NORTH LIBERTY, IA 52317		50.00	<input type="checkbox"/>
10/27/06	ID# CK#	MARTHA SCHUT 1326 OXFORD PLACE IOWA CITY, IA 52240		100.00	<input type="checkbox"/>
10/27/06	ID# CK#	JAMES ADDY 301 E BELL DES MOINES, IA 50315		100.00	<input type="checkbox"/>

SUB-TOTAL

\$ 450.00

TOTAL (if last page of this schedule)

\$

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10/27/06	ID# CK#	ELIEEN FISHER 164 HUMMINGBIRD LANE IOWA CITY, IA 52245		\$100.00	<input type="checkbox"/>
10/27/06	ID# 9735 CK# 1009	IOWA SIERRA CLUB PAC 3839 MERLE HAY RD, SUITE 280 DES MOINES, IA 50310		200.00	<input type="checkbox"/>
10/27/06	ID# CK#	DIANE HOFFMAN 203 A AVENUE SOUTH MOUNT VERNON, IA 52314		100.00	<input type="checkbox"/>
10/27/06	ID# CK#	KATHY LEGGETT 6106 PINWOOD COURT JOHNSTON, IA 50131		50.00	<input type="checkbox"/>
10/27/06	ID# CK#	DAVID LOEBSACK 610 THIRD AVENUE NORTH MOUNT VERNON, IA 52314		250.00	<input type="checkbox"/>
10/31/06	ID# CK#	JEAN MCALEER 307 LAKEVIEW DR MASON CITY, IA 50401		50.00	<input type="checkbox"/>
10/31/06	ID# CK#	CHRISTINE LAWLER 404 4TH AVE SW MOUNT VERNON, IA 52314		20.00	<input type="checkbox"/>
10/31/06	ID# CK#	ROGER SCHREDER 6605 GRANITE RIDGE CT NW CEDAR RAPIDS, IA 52405		20.00	<input type="checkbox"/>
10/31/06	ID# CK#	CAROLN PALMER 1345 SPRINGVILLE RD MOUNT VERNON, IA 52314		100.00	<input type="checkbox"/>
10/31/06	ID# CK#	MARYANN REZABEK 3007 SUE LANE NW CEDAR RAPIDS, IA 52405		5.00	<input type="checkbox"/>

SUB-TOTAL  
\$ 895.00  
TOTAL (if last page of this schedule)  
\$

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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
10/31/06	ID# CK#	NANCY ROYER 307 FRANKLIN STREET LISBON, IA 52253		\$30.00	<input type="checkbox"/>
10/31/06	ID# CK#	MICHAEL RYAN 115 CANDLESTICK DR MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
10/31/06	ID# CK#	VIVIAN HEYWOOD 502 COLLEGE BLVD MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
10/31/06	ID# CK#	JANICE HORAK 1354 CURTIS BRIDGE RD NE SWISHER, IA 52338		30.00	<input type="checkbox"/>
10/31/06	ID# CK#	LEILA CARLSON 2014 39TH ST DES MOINES, IA 50310		50.00	<input type="checkbox"/>
10/31/06	ID# CK#	DAVID RUST 915 E BLOOMINGTON ST IOWA CITY, IA 52245		50.00	<input type="checkbox"/>
10/31/06	ID# CK#	KASEY MERRILL 318 2ND STREET SW MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
10/31/06	ID# CK#	LESLIE STOKKE 225 2ND ST SE, SUITE 310 CEDAR RAPIDS, IA 52401		50.00	<input type="checkbox"/>
10/31/06	ID# CK#	DIANA ZIMMERMAN 4625 SUGAR PINE DR NE CEDAR RAPIDS, IA 52402		20.00	<input type="checkbox"/>
10/31/06	ID# CK#	DIANE KUTZKO 2026 5TH AVE SE CEDAR RAPIDS, IA 52403		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 330.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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

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)  
FOEGE FOR CITIZENS #887

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
10/31/06	ID# 9699 CK# 1022	RPELF OF IOWA 3802 6TH AVE DES MOINES, IA 50313		\$500.00	<input type="checkbox"/>
10/31/06	ID# 9698 CK# 558	IAAMB PAC 4949 WESTOWN PKWY, SUITE 165-111 WEST DES MOINES, IA 50266		250.00	<input type="checkbox"/>
10/31/06	ID# CK#	JANET SCHARNBERG 419 N 3RD AVE MOUNT VERNON, IA 52314		10.00	<input type="checkbox"/>
10/31/06	ID# CK#	MARK THOMAS 519 UPPER TERRACE DR INDEPENDENCE, IA 50644		10.00	<input type="checkbox"/>
10/31/06	ID# CK#	DAVID PURDY 1434 EAST BLOOMINGTON ST IOWA CITY, IA 52245		25.00	<input type="checkbox"/>
10/31/06	ID# CK#	MARJORIE BUNTZ 2623 E LEACH AVE DES MOINES, IA 50320		25.00	<input type="checkbox"/>
10/31/06	ID# CK#	HAROLD TEMPLEMAN 829 23RD ST WEST DES MOINES, IA 50265		25.00	<input type="checkbox"/>
10/31/06	ID# CK#	MYRT BOWERS 203 LINCOLD NWY MOUNT VERNON, IA 52314		25.00	<input type="checkbox"/>
10/31/06	ID# CK#	BARBARA BOATWRIGHT 2331 EAST 39TH COURT DES MOINES, IA 50317		50.00	<input type="checkbox"/>
10/31/06	ID# CK#	ORTHA HARSTAD 2115 1ST AVE SE, APT 3324 CEDAR RAPIDS, IA 52402		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 970.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
FOEGE FOR CITIZENS #887

**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.

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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
10/31/06	ID# CK#	ROBERT BACON 1965 JEFFREY ST IOWA CITY, IA 52246		\$50.00	<input type="checkbox"/>
10/31/06	ID# CK#	DELORES LIFSON 219 6TH AVE N MOUNT VERNON, IA 52314		50.00	<input type="checkbox"/>
10/31/06	ID# CK#	THOMAS LAPOINTE 5597 MEREDITH DR, UNIT B DES MOINES, IA 50310		100.00	<input type="checkbox"/>
10/31/06	ID# CK#	MARIANNE MICHAEL PO BOX 220 HILLS, IA 52235		5.00	<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"/>

SUB-TOTAL \$ 205.00  
**TOTAL (if last page of this schedule)** \$ 7,105.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

**Reset Form**

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

<b>SCHEDULE 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)  
FOEGE FOR CITIZENS #887

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
10/16/06	ID# CK# 628	MELANIE FRIEDMAN ONE KNOLLWOOD IOWA CITY, IA	MAILING LABELS AND CONTACT SERVICE	\$ 108.82
10/16/06	ID# CK# 629	SUSAN SALTER 507 B WASHINGTON CT MOUNT VERNON, IA 52314	RECEPTION SUPPLIES	56.72
10/16/06	ID# CK# 630	TRUMAN FUND 5661 FLEUR DR DES MOINES, IA 50321	DONATION	5000.00
10/16/06	ID# CK# 631	US POSTMASTER MOUNT VERNON, IA 52314	POSTAGE	71.40
10/23/06	ID# CK# 632	HYBRID PUBLICATIONS PO BOX 249 SOLON, IA 52333	ADVERTISING	528.00
10/23/06	ID# CK# 633	CLEAR CHANNEL COMM 200 E BASSE SAN ANTONIO, TX 78209	RADIO ADVERTISING	1497.00
10/23/06	ID# CK# 634	KCJJ RADIO PO BOX 2118 IOWA CITY, IA 52244	RADIO ADVERTISING	1204.00
10/23/06	ID# CK# 635	CLEAR CHANNEL COMM 200 E BASSE SAN ANTONIO, TX 78209	RADIO ADVERTISING	955.00
SUB-TOTAL				\$ 9,420.94
<b>TOTAL (if last page of this schedule)</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 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

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

<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)  
FOEGE FOR CITIZENS #887

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
10/23/06	ID# CK# 636	MOUNT VERNON LISBON SUN 108 1ST STREET WEST MOUNT VERNON, IA 52314	ADVERTISING	\$ 430.00
10/23/06	ID# CK# 637	KMRY RADIO 1957 BLAIRSFERRY ROAD NE CEDAR RAPIDS, IA 52402	RADIO ADVERTISING	1040.00
10/24/06	ID# CK# 638	SPRINGVILLE TELEPHONE SPRINGVILLE, IA 52336	ADVERTISING	24.00
10/24/06	ID# CK# 639	MELANIE FRIEDMAN ONE KNOLLWOOD LANE IOWA CITY, IA 52245	CONSULTING FEES	1500.00
10/24/06	ID# CK# 640	US POSTMASTER MOUNT VERNON, IA 52314	POSTAGE	295.41
10/25/06	ID# CK# 641	CARTER PRINTING 1739 EAST GRAND AVE DES MOINES, IA 50316	BROCHURE PRINTING	787.54
10/25/06	ID# CK# 642	MEYER ASSOCIATES 14 NORTH SEVENTH AVE ST CLOUD, MN 56303	ROBO CALLS	52.40
10/25/06	ID# CK# 643	SERVICE PRESS & LITHO CO 1105 3RD STREET SE CEDAR RAPIDS, IA 52401	ENVELOPES AND PRINTING	1021.65
SUB-TOTAL				\$ 5151.00
<b>TOTAL (if last page of this schedule)</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 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset 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)  
FOEGE FOR CITIZENS #887

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
10/25/06	ID# CK# 644	SODEXHO CAMPUS SERVICES 1220 1ST AVE NE CEDAR RAPIDS, IA 52402	RECEPTION SUPPLIES	\$ 126.00
10/26/06	ID# CK# 645	US POSTMASTER MOUNT VERNON, IA 52314	POSTAGE	1833.26
10/28/06	ID# CK# 646	TRUMAN FUND 5661 FLEUR DR DES MOINES, IA 50321	DONATION	5000.00
10/30/06	ID# CK# 647	US POSTMASTER MOUNT VERNON, IA 52314	POSTAGE	1065.31
10/30/06	ID# CK# 648	MEDIACOM 6300 Council St. NE Cedar Rapids, IA 52402	TV ADVERTISING	1003.00
10/20/06	ID# CK#	Act Blue PO Box 382110 Cambridge, MA 02238	Credit card fees	.93
10/22/06	ID# CK#	Act Blue PO Box 382110 Cambridge, MA 02238	Credit card fees	13.50
	ID# CK#			

SUB-TOTAL \$ 9,042.00

TOTAL (if last page of this schedule) \$ 23,613.94

**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).)

Reset Form

SCHEDULE <b>G</b> (Rev. 02/96)	BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

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

FOEGE FOR CITIZENS #887

**PART II- ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT** (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)

**PART I - NAME AND ADDRESS OF CONSULTANT**

<b>Name of Consultant</b> MELANIE FRIEDMAN		
<b>Mailing Address</b> ONE KNOLLWOOD LANE		
<b>City</b> IOWA CITY, IOWA	<b>State</b> IOWA	<b>Zip Code</b> 52245

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
			\$

<b>CONTRACT PERIOD (MM/DD/YR)</b> From 8-1-06 To 11-30-06	<b>TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE</b> \$ 9,000.00
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**ESTIMATES OF PERFORMANCE**

TO PROVIDE POLITICAL CONSULTATION SERVICES AS  
 \_\_\_\_\_  
 NEEDED  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>SUB-TOTAL</b>	\$
<b>TOTAL (If last page of this schedule)</b>	\$