

DISCLOSURE SUMMARY PAGE

ETHICS & CAMPAIGN DISCLOSURE FILED MAY 22 2006 PM 5-19

FORM DR-2 (Rev. 02/96) DISCLOSURE REPORT For Office Use Only Comm. # 997 Indexed Audited Computer

COMMITTEE NAME (Must be same as on Statement of Organization) Friends for Dix IMPORTANT: Indicate type of committee you are reporting for: [1] (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates

Cathi Burnette Treasurer 319-824-6021 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

5/19/06 DATE SIGNED

Penalties Due For Late Filed Reports Range from \$10 to \$400

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A May 19, 2006 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR. (report date) Indicate one [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 Notice of Dissolution 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. (This is the total of all monies 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.) \$ 3,187.53 ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) 116.00 Schedule C: Fund-raising Events total (Attach Schedule C) 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 .....\$ 3,303.53 SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) 3,303.53 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) \$ 0 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) \$ CANDIDATE COMMITTEES ONLY: CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**  
(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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
<i>4/28/06</i>	ID# CK#	<i>Bill Dix P.O. Box 220 Steel Rock, IA 50670</i>	<i>refund for meals expense on Jun. 19, 06 Report</i>	<i>\$ 116.00</i>	
	ID# CK#				

SUB-TOTAL  
\$  
TOTAL (if last page of this schedule) *\$ 116.00*

\* 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) (See Page 2 of forms packet.). 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

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	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)  
*Friends For Dix*

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
1/7/06	ID# CK#	RPI 521 East Leicest Des Moines, IA 50309	Contribution	\$ 500.00
1/2/06	ID# CK#	Lions Club 40 Bob Andreae 714 N. Cherry Shell Rock, IA 50670	Dues 11/06-6/30/06	50.00
1/12/06	ID# CK#	Waverly Newspapers P.O. Box 858, 311 Bremer Waverly, IA 50677	Subscription renewal	35.00
2/21/06	ID# CK#	Christian Coalition P.O. Box 65066 West Des Moines, IA 50265	Contribution	500.00
4/28/06	ID# CK#	Butler Co. Rep Party 27373 Range Ave. Clarksville, IA 50619	Contribution	1,103.95
4/28/06	ID# CK#	Bremer Co. Republican 2367 Sable Ave. Party Readlyn, IA. 50668	Contribution	1,103.94
	ID# CK#	Grundy National Bank P.O. Box 246 Grundy Center, IA. 50638	Service Chgs and tax on Acct Ser Feb. 2006 - May 2006	10.64
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (if last page of this schedule)</b>				<b>\$3363.53</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 56.6(3)(i).)

IA ETHICS & CAMPAIGN DISCLOSURE BOARD

MAY 22 2006

pm 5:19

(Rev. 07/03)

# Notice of Dissolution

**DR-3**  
**NOTICE OF DISSOLUTION**

**Mail to:**  
IECDB  
510 East 12<sup>th</sup>, Suite 1A  
Des Moines, Iowa 50319

**For Office Use Only**

Comm. # 997  
Indexed \_\_\_\_\_  
Audited \_\_\_\_\_  
Computer DB  
Certified Date of Dissolution \_\_\_\_\_

**COMMITTEE NAME**

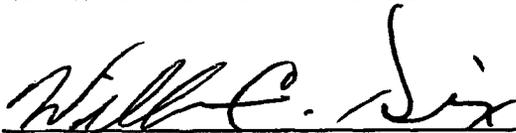
Friends For Dix	
Official Name of Committee	
P.O. Box 220	
Street	
Shell Rock, IA 50670	
City, State, Zip Code	
(319)	885-6790
Area Code	Telephone

**WHEN TO FILE:**

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.



Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

05-19-06

Date Signed

**FOR INSTRUCTIONS, SEE BACK OF FORM**

This form is not applicable to statutory political committees.