

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 12/2006)	DISCLOSURE REPORT
For Office Use Only	
Comm #	<u>6089</u>
Logged in	<u>5</u>
Scanned	
Computer	
Audited	
File with Iowa Ethics and Campaign Disclosure Board 510 E 12th, Ste. 1A Des Moines, Iowa 50319 Fax 515-281-3701	

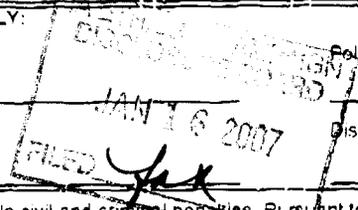
COMMITTEE NAME (Must be same as on Statement of Organization)

Operating Engineers Local 234 Political Fund #6089

IMPORTANT: Indicate by # type of committee you are reporting for: 2  
 (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 Issues

CANDIDATE COMMITTEES ONLY:

Candidate Name \_\_\_\_\_ Political Party (if applicable) \_\_\_\_\_  
 Office Sought \_\_\_\_\_ 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.

Arac Peterson  
SIGNATURE OF PERSON FILING REPORT

515-265-1657  
TELEPHONE

1-16-2007  
DATE SIGNED

I AM FILING A 10-15 through 12-31-06  
(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.)

Local Committees, enter Date of Election _____ County & Local Committees, enter County in which Election is held _____
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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) .....	\$ 21,206.03
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) .....	17,996.53
Schedule F: Loans Received total (Attach Schedule F) .....	
Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....	
<u>(Schedule H applies to Candidates' Committees Only)</u>	
<b>SUB-TOTAL</b> .....	\$ 39,202.56
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) .....	1,000.00
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) .....	\$ 38,202.56
<b>UNPAID BILLS</b> (From Schedule D - Attach Schedule D) .....	\$ _____
<b>IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	\$ _____
<b>OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F) .....	\$ _____
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?) .....	___ YES ___ NO
<b>CANDIDATE COMMITTEES ONLY:</b>	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) .....	\$ _____

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

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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)  
 Operating Engineers Local 234 Political Fund #6089

**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/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
10-24-06	ID# CK#	Signed checkoff authorizations from Membership		\$8677.48	<input type="checkbox"/>
11-9-06	ID# CK#	Monthly Membership Dues for Oct 2006		1634.00	<input type="checkbox"/>
11-21-06	ID# CK#	Signed checkoff authorizations from Membership		6480.05	<input type="checkbox"/>
12-4-06	ID# CK#	Monthly Membership Dues for Nov 2006		1205.00	<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"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$	
<b>TOTAL (If last page of this schedule)</b>				\$	17996.53

\* 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

Resct. Form

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

SCHEDULE  
**B**  
(Rev. 07/03) MONETARY EXPENDITURES

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.

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Operating Engineers Local 234 Political Fund #6089

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12-22-06	ID# CK# 384	Meyer for Council 5417 SE 29th Street Des Moines, IA 50320	Campaign Contribution	\$ 1000.00
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (If last page of this schedule)</b>				<b>\$ 1000.00</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.4 (2)(3)(i).)