FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT

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

Ankeny Area Democrats

IA ETHICS AND CAMPAIGN DISCLOSURE BD. 2008 MAY 20 AM 10:15

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 Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name _____ Political Party (if applicable) _____

Office Sought _____ District (if Senate or House) _____

For Office Use Only: Comm. # 9703 S; 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

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.

Barbara A. Sorrie — SIGNATURE OF PERSON FILING REPORT

515-964-0292 — TELEPHONE

5-17-08 — DATE SIGNED

I AM FILING A 1-1-08 THRU 5-14-08 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 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.) $	2632.90
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	3097.93
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 $	5730.83
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	995.22
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) $	4735.61
**UNPAID BILLS (From Schedule D - Attach Schedule D) $	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) $	70.02
**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
☐ 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)*
Ankeny Area Democrats

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
1-1-08	ID# CK#	Veridian Credit Union 410 N. Ankeny Blvd Ankeny, IA 50023 Interest		$ .26¢	☐
1-1-08	ID# CK#	Veridian C.U. - Interest		.18¢	☐
1-3-08	ID# CK#	Caucuses - Envelope Donations House 70 race		418.83	X
1-3-08	ID# CK#	Caucuses - Envelope Donations House 70 race		489.26	X
1-15-08	ID# CK#	Char Yeed EFT 2301 S.W. Oralabor Rd #97 Ankeny, IA 50023		25.00	☐
1-22-08	ID# CK#	Don Miller P.O. Box 647 Johnston, IA 50131		200.-	☐
2-1-08	ID# CK#	Veridian C.U. Interest .39 23		.62¢	☐
2-20-08	ID# CK#	Rob Yucher 3111 S.W. 24th Ankeny, IA 50023		$1,000	☐
2-20-08	ID# CK#	Pass hat at meeting		131.00	☐
2-20-08	ID# CK#	Barbara Sorrie 320 N.E. 31st Ankeny, IA 50021		25.00	☐
			SUB-TOTAL	$2290.15	
			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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CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS

☐ CHECK THIS BOX IF AMENDING FORM

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

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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
2-20-08	ID# CK#	Cynthia Eisenhauer 710 N.W. Ash Ankeny, IA 50023		$ 25.00	☐
2-22-08	ID# CK#	Char Feed EFT 2301 S.W. Oralabor Rd #97 Ankeny, IA 50023		25.00	☐
3-1-08	ID# CK#	Veridian C.U. Interest		.589	☐
3-1-08	ID# CK#	Veridian CU Interest		.21¢	☐
3-8-08	ID# CK#	Basket donations Delegate/Alternate Information Event		95.00	☐
3-8-08	ID# CK#	Douglas Habig 403 N.E. 24th Ct Ankeny, IA 50021		50.00	☐
3-8-08	ID# CK#	Cheryl A. Oralabor 3012 S.W. Butternut Dr. Ankeny, IA 50023		25.00	☐
3-17-08	ID# CK#	Char Feed - EFT 2301 S.W. Oralabor Rd #97 Ankeny, IA 50023		25.00	☐
4-1-08	ID# CK#	Veridian C.U. Interest .25 .77 1.02		1.02	☐
4-15-08	ID# CK#	Char Feed EFT 2301 S.W. Oralabor Rd #97 Ankeny, IA 50023		25.00	☐

SUB-TOTAL $ 271.81

TOTAL *(If last page of this schedule)* $

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For Instructions, See Back of Form

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ 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)*
Ankeny Area Democrats

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
4-17-08	ID# CK#	Basket donations at meeting		$ 85.00	☐
4-17-08	ID# CK#	Don Miller P.O. Box 647 Johnston, IA 50131		200.00	☐
4-18-08	ID# CK#	Arvid & Mary Oliver 1709 N.E. Lowell Ct Ankeny, IA 50021		200.00	☐
4-18-08	ID# CK#	Barbara Lodie 320 N.E. 31st St Ankeny, IA 50021		50.00	☐
5-1-08	ID# CK#	Veridian C.U. Interest .21 .76 .97¢		.97¢	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐

SUB-TOTAL $ 535.97

TOTAL *(If last page of this schedule)* $ 3097.93

* 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 B (Rev. 07/03)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)*
Ankeny Area Democrats

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
1-10-08	ID# CK# 1066	Ankeny Area Chamber of Commerce P.O. Box 488 Ankeny, IA 50023	Membership	$ 140.00
2-27-08	ID# CK# 1067	Neveln Center 306 S.W. School St. Ankeny, IA 50023	Room rental fee for Delegate/Alternates to Convention - Information Event	75.00
2-29-08	ID# CK# 1069	USPS Ankeny Post office Ankeny, IA 50021	Stamps for mailing invitations for Delegate/Alternate Info Meeting	90.20
3-22-08	ID# CK# 1070	Carter Printing 1739 East Grand Ave Des Moines, IA 50316	1,500 brochures for Ankeny area Democrats	230.02
3-28-08	ID# CK# 1071	Cure 4 Lupus.Org 7711 Airline Ave Urbandale, IA 50322	Maintenance Fee for Web site	120.00
3-30-08	ID# CK# 1072	Neveln Center 306 S.W. School Ankeny, IA 50023	Room Rent for Info Forum on Court House Bond Issue	75.00
3-30-09	ID# CK# 1073	Ankeny Parks & Rec 210 S. Ankeny Blvd. Ankeny, IA 50023	Rent for Summerfest Site	20.00
3-30-09	ID# CK# 1074	Ankeny Parks & Rec 210 S. Ankeny Blvd Ankeny, IA 50023	Damage Deposit for Summerfest Event	100.00
			SUB-TOTAL	$ 850.22
			TOTAL *(If last page of this schedule)*	$

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 Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING FORM	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)*
Ankeny Area Democrats

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
5-2-08	ID# CK# 1075	Ankeny Summerfest P.O. Box 243 Ankeny, IA 50023	Parade Entry Fee	$ 25.00
5-10-08	ID# CK# 1076	Cure 4 Lupus.org P.O. Box 815 Ankeny, IA 50021	Maintenance Fee for website	120.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$ 145.00
			TOTAL *(If last page of this schedule)*	$ 995.22

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)(l).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Reset Form

SCHEDULE E (Rev. 06/97) — IN-KIND CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
3-8-08	ROB TUCKER 3111 SW 24th ST. Ankeny, IA 50023		COOKIES DONATED DELEG/ALT INFO EVENT	$ 3.00	☐
3-8-08	Bard Sonlie 320 NE 31 ST Ankeny IA 50021		COOKIES DONATED DELEG/ALT INFO EVENT	3.00	☐
3-8-08	CHARLES WRIGHT 405 S.E Delaware #205 Ankeny, IA 50021		COOKIES/BARS DONATED DELEG/ALT INFO EVENT	$12.00	☐
3-8-08	DEE STOLZE 2901 SW Townpark DRIVE ANKENY, IA 50023		BARS DONATED DELEGATE/ALT INFO EVENT	3.00	☐
3-8-08	JOHN OLSEN 1106 NW LINDEN ST ANKENY, IA 50023		FRUIT TRAY DEL/ALT INFO EVENT	5.00	☐
3-8-08	DOUGLAS HABIG 403 N.E. 24th CT. ANKENY, IA 50021		VEGGIE TRAY WITH DIP DEL/ALT INFO EVENT	16.00	☐
3-2-08	RAY BLASE 913 NE 34th St Ankeny, IA 50021		ENVELOPES FOR INVITE TO DELEGATE ALT EVENT	9.50	☐
3-1-08	ARVID OLIVER 1709 NE Lowell Ct Ankeny, IA 50021		INVITATIONS + ENVELOPES/ DEL/ALT INFO EVENT	10.12	☐
3-2-08	MATT DROTTZ 2403 N.E OAK #6 ANKENY, IA 50021		MAILING LABELS DEL/ALT INFO EVENT	8.40	☐
					☐

SUB-TOTAL $ 70.02

TOTAL (If last page of this schedule) $

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.