

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
IOWA DEMOCRATIC PARTY

ADDRESS (number and street) 5661 Fleur Drive  
 Check if different than previously reported. (ACC)  
Des Moines IA 50321

2. **FEC IDENTIFICATION NUMBER** C00035600  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 06 01 2005 through 06 30 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ken Sagar

Signature of Treasurer Electronically Filed by Ken Sagar Date 07 20 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
IOWA DEMOCRATIC PARTY

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		781140.55
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period .....	278668.01									
(c) Total Receipts (from Line 19) .....	73060.80	390031.06								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	351728.81	1171171.61								
7. Total Disbursements (from Line 31) .....	73052.50	892495.30								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	278676.31	278676.31								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	2000.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
IOWA DEMOCRATIC PARTY

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	30147.00	117581.00
(i) Itemized (use Schedule A) .....	11387.55	23490.30
(ii) Unitemized .....	41534.55	141071.30
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	7500.00	32351.91
(c) Other Political Committees (such as PACs) .....	49034.55	173423.21
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	15000.00	98984.27
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	61232.09
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	8276.25	55641.49
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	750.00	750.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	750.00	750.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	73060.80	390031.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	72310.80	389281.06

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	2758.26	16706.38
(ii) Non-Federal Share.....	12130.66	85980.02
(b) Other Federal Operating Expenditures.....	18470.07	67228.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	33358.99	169914.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	560049.76
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	200.00	200.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	450.00	450.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	450.00	450.00
29. Other Disbursements.....	25000.00	136200.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	29.41
(ii) "Levin" Share .....	0.00	166.69
(b) Federal Election Activity Paid Entirely With Federal Funds .....	14043.51	25484.63
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	14043.51	25680.73
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	73052.50	892495.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	60921.84	806348.59

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	49034.55	173423.21
34. Total Contribution Refunds (from Line 28(d)) .....	450.00	450.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	48584.55	172973.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21228.33	83934.79
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	61232.09
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	21228.33	22702.70

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Brenda D O'Brien		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 5	
Mailing Address 265 Knowing Dr		<b>Transaction ID:</b> C62777	
City Coralville	State IA	Amount of Each Receipt this Period 200.00	
Zip Code 52241-3332			
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Brenda D O'Brien		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 5	
Mailing Address 265 Knowing Dr		<b>Transaction ID:</b> C62878	
City Coralville	State IA	Amount of Each Receipt this Period 100.00	
Zip Code 52241-3332			
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Steve Michalicek		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 5	
Mailing Address 211 1st Ave SE		<b>Transaction ID:</b> C62776	
City Cedar Rapids	State IA	Amount of Each Receipt this Period 500.00	
Zip Code 52401-1101			
FEC ID number of contributing federal political committee. C			
Name of Employer Dominion & Co, Inc.	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A.</b> Steve Michalicek		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5	
Mailing Address 211 1st Ave SE		<b>Transaction ID:</b> C62814	
City State Zip Code Cedar Rapids IA 52401-1101	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dominion & Co, Inc.	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Kay Jeane Riley		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 5	
Mailing Address 2910 Cayuga Pt		<b>Transaction ID:</b> C62915	
City State Zip Code Des Moines IA 50321-1315	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Kathleen Brigid Halloran		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 2 / 2 0 0 5	
Mailing Address 825 17th Street SE		<b>Transaction ID:</b> C62737	
City State Zip Code Cedar Rapids IA 52403-2609	Amount of Each Receipt this Period 417.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer City of Cedar Rapids	Occupation Mayor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2335.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	767.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 8 / 63</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

Full Name (Last, First, Middle Initial) <b>A. Kathleen Brigid Halloran</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2005	
Mailing Address <b>825 17th Street SE</b>		<b>Transaction ID: C62980</b>	
City <b>Cedar Rapids</b>	State <b>IA</b>	Zip Code <b>52403-2609</b>	Amount of Each Receipt this Period 417.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer City of Cedar Rapids	Occupation <b>Mayor</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2335.00		

Full Name (Last, First, Middle Initial) <b>B. Karen A Lischer</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2005	
Mailing Address <b>816 Roberts Terrace</b>		<b>Transaction ID: C62772</b>	
City <b>Marshalltown</b>	State <b>IA</b>	Zip Code <b>50158-4327</b>	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mid-Iowa Community Action	Occupation <b>Administrative Assistant</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Marcia Rogers</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 06 / 2005	
Mailing Address <b>2201 Ridgeway Dr SE</b>		<b>Transaction ID: C62763</b>	
City <b>Cedar Rapids</b>	State <b>IA</b>	Zip Code <b>52403-4242</b>	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Management Resource Group	Occupation <b>President</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1917.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Gerald David Hurd

Mailing Address 300 Walnut Street  
Unit 183

City State Zip Code  
Des Moines IA 50309-2244

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2168.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 5

Transaction ID: C62974

Amount of Each Receipt this Period  
417.00

**B.** Full Name (Last, First, Middle Initial)  
Robert Bradley Skinner

Mailing Address 1810 Andrews Dr

City State Zip Code  
Pleasant Hill IA 50327-0910

FEC ID number of contributing federal political committee. **C**

Name of Employer Skinner Law Firm Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2085.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 5

Transaction ID: C62738

Amount of Each Receipt this Period  
417.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Bradley Skinner

Mailing Address 1810 Andrews Dr

City State Zip Code  
Pleasant Hill IA 50327-0910

FEC ID number of contributing federal political committee. **C**

Name of Employer Skinner Law Firm Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2085.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 5

Transaction ID: C62981

Amount of Each Receipt this Period  
417.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1251.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A.</b> Richard Lloyd-Jones		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 5	
Mailing Address 160 Oakridge Ave		<b>Transaction ID:</b> C62825	
City Iowa City	State IA	Amount of Each Receipt this Period 500.00	
Zip Code 52246-2935			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> James C Conlin		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 5	
Mailing Address 500 Griffin Bldg 319 7th St		<b>Transaction ID:</b> C62936	
City Des Moines	State IA	Amount of Each Receipt this Period 1000.00	
Zip Code 50309			
FEC ID number of contributing federal political committee. C			
Name of Employer Conlin Properties	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Doug Brant Haviland		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 5	
Mailing Address 1239 Wisconsin Avenue		<b>Transaction ID:</b> C62983	
City Ames	State IA	Amount of Each Receipt this Period 300.00	
Zip Code 50014-3972			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A.</b> John C Cacciatore		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address 1700 Casady Dr		<b>Transaction ID:</b> C62888
City Des Moines	State IA	Zip Code 50315-1830
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 120.00
Name of Employer Policy Works	Occupation Senior Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00	

Full Name (Last, First, Middle Initial) <b>B.</b> David Wayne Loeb sack		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 3 / 2 0 0 5
Mailing Address 610 3rd Ave NW		<b>Transaction ID:</b> C62758
City Mount Vernon	State IA	Zip Code 52314-1101
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 250.00
Name of Employer United States House of Re- presentat	Occupation U.S. Congressman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> David Wayne Loeb sack		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 3 / 2 0 0 5
Mailing Address 610 3rd Ave NW		<b>Transaction ID:</b> C62757
City Mount Vernon	State IA	Zip Code 52314-1101
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 50.00
Name of Employer United States House of Re- presentat	Occupation U.S. Congressman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	420.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 63
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Mitchell E Turner</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 01 / 2005	
Mailing Address 2800 Adirondack Drve NE		<b>Transaction ID: C62734</b>	
City State Zip Code Cedar Rapids IA 52402		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation JUDGE JUDGE			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. Dawn E Pettengill</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 10 / 2005	
Mailing Address PO Box 76303		<b>Transaction ID: C62787</b>	
City State Zip Code Mount Auburn IA 52313		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation State of Iowa State Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Jeffrey D Goetz</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 15 / 2005	
Mailing Address 701 54th St		<b>Transaction ID: C62893</b>	
City State Zip Code Des Moines IA 50312-1822		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Bradshaw Law Attorney at Law			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Jeffrey D Goetz</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2005	
Mailing Address 701 54th St		<b>Transaction ID: C62898</b>	
City State Zip Code Des Moines IA 50312-1822		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Bradshaw Law Attorney at Law			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) <b>B. Martha Anne Easter-Wells</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2005	
Mailing Address 22905 Great River Rd		<b>Transaction ID: C62889</b>	
City State Zip Code Le Claire IA 52753		Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Fundraising consultant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Katherine B Fromm</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2005	
Mailing Address 3531 George Washington Carver Ave		<b>Transaction ID: C62783</b>	
City State Zip Code Ames IA 50010-9287		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Iowa State University Professor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A.</b> William A Dotzler, JR		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address 2837 Cedar Terrace Dr		<b>Transaction ID:</b> C62857
City Waterloo	State IA	Zip Code 50702-4513
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer State of Iowa	Occupation State Senator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 301.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Linda D Fanton		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 5
Mailing Address 212 S Cedar St		<b>Transaction ID:</b> C62781
City Monticello	State IA	Zip Code 52310-1603
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Eastern Iowa Visiting Nurses	Occupation Nurse/Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> David W Miles		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 5
Mailing Address 1402 Tulip Tree Ln		<b>Transaction ID:</b> C62731
City West Des Moines	State IA	Zip Code 50266-6665
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00
Name of Employer Principal Financial Group	Occupation Asset Manager Director	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Tom Riley</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 5	
Mailing Address 5300 Lakeside Rd		<b>Transaction ID: C62760</b>	
City State Zip Code Marion IA 52302-9378	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self Occupation Attorney	Aggregate Year-to-Date ▼ 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Janet E Parker</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 5	
Mailing Address 686 63rd St		<b>Transaction ID: C62812</b>	
City State Zip Code Des Moines IA 50312-1006	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 340.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Stacey J O'Brien</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 5	
Mailing Address 4726 Leprechaun Ln		<b>Transaction ID: C62823</b>	
City State Zip Code Cedar Rapids IA 52411-7938	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Garnet Place Occupation Social Worker	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Alta L Price, MD</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2005	
Mailing Address 4888 School House Rd		<b>Transaction ID: C62860</b>	
City State Zip Code Bettendorf IA 52722-6576	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Metropolitan Medical Laboratories	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1050.00		

Full Name (Last, First, Middle Initial) <b>B. Mary Polly Bukta</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2005	
Mailing Address 604 S 32nd St		<b>Transaction ID: C62727</b>	
City State Zip Code Clinton IA 52732-9444	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer State of Iowa	Occupation State Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		

Full Name (Last, First, Middle Initial) <b>C. Susan Kay Cameron</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2005	
Mailing Address 600 Brentwood Dr		<b>Transaction ID: C62935</b>	
City State Zip Code Waukee IA 50263-8273	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Charles Hutchins and Associates	Occupation Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Susan M Conroy

Mailing Address 707 E Pleasant Valley St

City Sigourney State IA Zip Code 52591-1829

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
06 / 13 / 2005

Transaction ID: C62791

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Susan M Conroy

Mailing Address 707 E Pleasant Valley St

City Sigourney State IA Zip Code 52591-1829

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
06 / 14 / 2005

Transaction ID: C62886

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Dwayne D. Fehr

Mailing Address 1052 Forty Oaks Dr

City Story City State IA Zip Code 50248-1800

FEC ID number of contributing federal political committee. **C**

Name of Employer Sauer-Danfoss Occupation Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
06 / 14 / 2005

Transaction ID: C62890

Amount of Each Receipt this Period  
600.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Margaret M Weiss

Mailing Address 4819 Waterbury Rd

City State Zip Code  
Des Moines IA 50312-1965

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Iowa Historical Foundation Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 03 / 2005

Transaction ID: C62759

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Kate E Gronstal

Mailing Address 1720 27th Ave

City State Zip Code  
Council Bluffs IA 51501-6951

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Kirkham-Michael Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 28 / 2005

Transaction ID: C62977

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
Arthur C Hedberg, JR

Mailing Address 1716 E 31st Ct

City State Zip Code  
Des Moines IA 50317-8620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 13 / 2005

Transaction ID: C62800

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>485.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Patrick Bartholomew Bauer

Mailing Address 338 Koser Ave

City Iowa City State IA Zip Code 52246-3002

FEC ID number of contributing federal political committee. **C**

Name of Employer University of Iowa Occupation Law Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
06 / 14 / 2005

Transaction ID: C62891

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
Brian Schoenjahr

Mailing Address PO Box 132  
221 Park Avenue

City Arlington State IA Zip Code 50606-0132

FEC ID number of contributing federal political committee. **C**

Name of Employer State of Iowa Occupation State Senator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
06 / 03 / 2005

Transaction ID: C62747

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
Anita C. Terpstra

Mailing Address 3003 Yorkshire Dr NE

City Cedar Rapids State IA Zip Code 52402-4353

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
06 / 14 / 2005

Transaction ID: C62824

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 63
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**IOWA DEMOCRATIC PARTY**

Full Name (Last, First, Middle Initial) <b>A. James Patrick Hayes</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>06 / 03 / 2005</b>
Mailing Address <b>1142 E Court St</b>		<b>Transaction ID: C62740</b>
City <b>Iowa City</b>	State <b>IA</b>	Zip Code <b>52240-3232</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer Self	Occupation <b>Attorney</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>B. Ryan Lee Montague</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>06 / 01 / 2005</b>
Mailing Address <b>525 Valley Brook Dr SE</b>		<b>Transaction ID: C62683</b>
City <b>Cedar Rapids</b>	State <b>IA</b>	Zip Code <b>52403-1608</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer Real Estate Investor/Owner	Occupation <b>Self</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Steve Wilson</b>		Date of Receipt M M / D D / Y Y Y Y Y <b>06 / 10 / 2005</b>
Mailing Address <b>4409 White Pine Dr NE</b>		<b>Transaction ID: C62788</b>
City <b>Cedar Rapids</b>	State <b>IA</b>	Zip Code <b>52402-2241</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>50.00</b>
Name of Employer NSA Network Services	Occupation <b>Owner</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>150.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1550.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 63
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Steve Wilson</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 5	
Mailing Address 4409 White Pine Dr NE		<b>Transaction ID: C62780</b>	
City State Zip Code Cedar Rapids IA 52402-2241	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NSA Network Services	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00		

Full Name (Last, First, Middle Initial) <b>B. Betty L McMahon</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5	
Mailing Address 3111 180th St		<b>Transaction ID: C62973</b>	
City State Zip Code Muscatine IA 52761-9546	Amount of Each Receipt this Period 240.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) <b>C. Marilyn P Murphy</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 5	
Mailing Address 1925 SE 82nd St		<b>Transaction ID: C62912</b>	
City State Zip Code Runnells IA 50237-2239	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	790.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 63
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A.</b> Rose A Vasquez		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2005	
Mailing Address 118 Water St Apt 425		<b>Transaction ID:</b> C62830	
City State Zip Code Des Moines IA 50309-4781	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Principal Financial Group	Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Philip Allen Specht		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2005	
Mailing Address 28304 Pleasant Ridge Rd		<b>Transaction ID:</b> C62784	
City State Zip Code Mc Gregor IA 52157-8700	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Farmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C.</b> John Richard Whitaker		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2005	
Mailing Address 32500 145th St		<b>Transaction ID:</b> C62778	
City State Zip Code Hillsboro IA 52630-8004	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer State of Iowa	Occupation Legislator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 202.70		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Arthur Ide</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 5	
Mailing Address PO Box 378		<b>Transaction ID: C62976</b>	
City State Zip Code Radcliffe IA 50230-0378		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. Brent Robert Appel</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5	
Mailing Address 10901180th Ave		<b>Transaction ID: C62985</b>	
City State Zip Code Ackworth IA 50001-9653		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Wandro, Baer and Casper, P.C. Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Thomas Martin Wertz</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 5	
Mailing Address 228 Lincoln Heights Dr		<b>Transaction ID: C62764</b>	
City State Zip Code Cedar Rapids IA 52403-3282		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Wertz Law Firm, PC Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 63
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A.</b> Roger T Stewart		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2005	
Mailing Address 3936 317th Ave		Transaction ID: C62852	
City Preston	State IA	Amount of Each Receipt this Period 100.00	
Zip Code 52069-9333		FEC ID number of contributing federal political committee. C	
Name of Employer State of Iowa	Occupation State Senator	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Georgia Helmick		Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2005	
Mailing Address 300 Walnut - No 75		Transaction ID: C62909	
City Des Moines	State IA	Amount of Each Receipt this Period 250.00	
Zip Code 50309		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 1650.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Tom L Heneke		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2005	
Mailing Address 2701 Erie Ave		Transaction ID: C62684	
City Spirit Lake	State IA	Amount of Each Receipt this Period 1000.00	
Zip Code 51360-2030		FEC ID number of contributing federal political committee. C	
Name of Employer MLR, LC	Occupation Financial Advisor	Aggregate Year-to-Date ▼ 1500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 63
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A.</b> Tom L Heneke		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2005	
Mailing Address 2701 Erie Ave		<b>Transaction ID:</b> C62789	
City State Zip Code Spirit Lake IA 51360-2030	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer MLR, LC	Occupation Financial Advisor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Herman C Quirnbach		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2005	
Mailing Address 1002 Jarrett Cir		<b>Transaction ID:</b> C62720	
City State Zip Code Ames IA 50014-3937	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer State of Iowa	Occupation State Senator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 501.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Douglas John McReynolds		Date of Receipt M M / D D / Y Y Y Y 06 / 13 / 2005	
Mailing Address PO Box 605		<b>Transaction ID:</b> C62794	
City State Zip Code Fayette IA 52142-0605	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Upper Iowa University	Occupation English Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) A. James A Clifton		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 1 / 2 0 0 5
Mailing Address 39 Audubon PI		Transaction ID: C62729
City Iowa City	State IA	Zip Code 52245-3437
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired Doctor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Dr. Julianne Hilda Thomas		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address 4749 Mount Vernon Rd SE		Transaction ID: C62877
City Cedar Rapids	State IA	Zip Code 52403-3941
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1100.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

Full Name (Last, First, Middle Initial) C. Dr. Julianne Hilda Thomas		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5
Mailing Address 4749 Mount Vernon Rd SE		Transaction ID: C62827
City Cedar Rapids	State IA	Zip Code 52403-3941
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Dr. Joe Matthew Seng

Mailing Address 4804 Northwest Blvd

City State Zip Code  
Davenport IA 52806

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Veterinarian

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
06 / 14 / 2005

Transaction ID: C62859

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Tina Marie Clawson

Mailing Address 2230 N Linwood Ave

City State Zip Code  
Davenport IA 52804-2531

FEC ID number of contributing federal political committee. **C**

Name of Employer TSA Occupation  
Security Screener

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 01 / 2005

Transaction ID: C62719

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
Alan R Bohanan

Mailing Address PO Box 247  
223 N Downey

City State Zip Code  
West Branch IA 52358-0247

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2005

Transaction ID: C62782

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Mary Catherine Braun</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2005	
Mailing Address 7701 Harbach Blvd		<b>Transaction ID: C62930</b>	
City State Zip Code Clive IA 50325-1237		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer State of Iowa Occupation Sr. Research Analyst			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B. Margaret M Whitworth</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2005	
Mailing Address 2402 D Ave NE		<b>Transaction ID: C62718</b>	
City State Zip Code Cedar Rapids IA 52402-4923		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Brucemore, Inc Occupation Executive Director			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Ben Rogers</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 09 / 2005	
Mailing Address 125 1/2 1st St W		<b>Transaction ID: C62775</b>	
City State Zip Code Mount Vernon IA 52314		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer The AdTrack Corporation Occupation Product Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Don Lamoyne Shultz</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 0 5	
Mailing Address 295 Kenilworth Rd		<b>Transaction ID: C62821</b>	
City Waterloo	State IA	Amount of Each Receipt this Period 250.00	
Zip Code 50701-4258			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer State of Iowa	Occupation State Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Alfredo G Parrish</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 5	
Mailing Address 17 32nd Place		<b>Transaction ID: C62975</b>	
City Des Moines	State IA	Amount of Each Receipt this Period 417.00	
Zip Code 50312-4522			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Parrish Law Firm	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2502.00		

Full Name (Last, First, Middle Initial) <b>C. Dan J. McGuire, SR</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 5	
Mailing Address 100 37th St		<b>Transaction ID: C62927</b>	
City Des Moines	State IA	Amount of Each Receipt this Period 250.00	
Zip Code 50312-4304			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	917.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 63
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Edward Benjamin Friedmann, JR		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5	
Mailing Address PO Box C 3274 Delta Circle		<b>Transaction ID:</b> C62820	
City Redfield	State IA	Amount of Each Receipt this Period 1000.00	
Zip Code 50233-0903			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Redfield Clinic	Occupation Physician's Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Edward Benjamin Friedmann, JR		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 5 / 2 0 0 5	
Mailing Address PO Box C 3274 Delta Circle		<b>Transaction ID:</b> C62906	
City Redfield	State IA	Amount of Each Receipt this Period 500.00	
Zip Code 50233-0903			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Redfield Clinic	Occupation Physician's Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2700.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Paul McAndrew Law Firm		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 4 / 2 0 0 5	
Mailing Address 2590 Holiday Rd Ste 100		<b>Transaction ID:</b> C62822	
City Coralville	State IA	Amount of Each Receipt this Period 250.00	
Zip Code 52241-2815			
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Paul McAndrew Law Firm	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	PARTNERSHIP--partners below if itemized	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 31 / 63	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) IOWA DEMOCRATIC PARTY
--

Full Name (Last, First, Middle Initial) A. Paul J McAndrew, Jr.	
Mailing Address 2590 Holiday Rd - Suite 100	
City Coralville	State IA
Zip Code 52241	
FEC ID number of contributing federal political committee. C	
Name of Employer Paul McAndrew Law Firm	Occupation Attorney
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00

Date of Receipt MM / DD / YYYY 06 / 14 / 2005
Transaction ID: C63011
Amount of Each Receipt this Period 250.00
<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	30147.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 63
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
AFSCME PEOPLE

Mailing Address 1625 L St NW

City State Zip Code  
Washington DC 20036-5665

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 14 / 2005

**Transaction ID:** C62887

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS

Mailing Address 1750 New York Ave NW

City State Zip Code  
Washington DC 20006-5301

FEC ID number of contributing federal political committee. **C** C70003108

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2005

**Transaction ID:** C62900

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	7500.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 63  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Dollars for Democrats - Unitemized

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
101702.88

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 3 0 / 2 0 0 5

Transaction ID: C66369

Amount of Each Receipt this Period  
38224.38

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Dollars for Democrats

Mailing Address 430 S Capitol St SE

City State Zip Code  
Washington DC 20003-4024

FEC ID number of contributing federal political committee. **C** C00073791

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
90000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 1 4 / 2 0 0 5

Transaction ID: C62892

Amount of Each Receipt this Period  
15000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Arthur Parker

Mailing Address PO Box 69

City State Zip Code  
Middle IA 52307-0069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N.C.S.PIERCEN SOFTWARE TEST ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 6 / 2 0 / 2 0 0 5

Transaction ID: C63007

Amount of Each Receipt this Period  
225.00

**[MEMO ITEM]**  
\* ASDC Dollars for Democrats

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15000.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 63
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A.** Full Name (Last, First, Middle Initial)  
Andrew G Gangle

Mailing Address 805 Southbranch Dr

City State Zip Code  
Waukee IA 50263-9588

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Peace Lutheran Church Pastor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 0 5

Transaction ID: C63006

Amount of Each Receipt this Period  
400.00

**[MEMO ITEM]**  
\* ASDC Dollars for Democrats

**B.** Full Name (Last, First, Middle Initial)  
Steven J Crowley

Mailing Address 10924 Oak Ridge Rd

City State Zip Code  
Burlington IA 52601-8645

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 5

Transaction ID: C63005

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
\* ASDC Dollars for Democrats

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	15000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 35 / 63	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) IOWA DEMOCRATIC PARTY
--

Full Name (Last, First, Middle Initial) A. Treasurer, State of Iowa	
Mailing Address PO Box 10412	
City Des Moines	State IA
Zip Code 50306-0412	
FEC ID number of contributing federal political committee.	C
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 56005.50

Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2005
Transaction ID: C62735
Amount of Each Receipt this Period 8276.25

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	8276.25
<b>TOTAL</b> This Period (last page this line number only) .....	▶	8276.25

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 63

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Eaton Enterprises</b>		<b>Transaction ID:</b> D16976 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 5
Mailing Address 3201 Forest Ave		Amount of Each Disbursement this Period 330.72
City Des Moines	State IA Zip Code 50311-2839	
Purpose of Disbursement Plaques		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District: N		

Full Name (Last, First, Middle Initial) <b>B. Crowne Plaza</b>		<b>Transaction ID:</b> D16966 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 5
Mailing Address 350 1st Ave NE		Amount of Each Disbursement this Period 12621.18
City Cedar Rapids	State IA Zip Code 52401-1108	
Purpose of Disbursement Catering for FR Event		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District: N		

Full Name (Last, First, Middle Initial) <b>C. Crowne Plaza</b>		<b>Transaction ID:</b> D16975 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 5
Mailing Address 350 1st Ave NE		Amount of Each Disbursement this Period 63.55
City Cedar Rapids	State IA Zip Code 52401-1108	
Purpose of Disbursement Catering for FR Event		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District: N		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	13015.45
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 63

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Earlham Savings Bank</b>		Transaction ID: D16942 Date of Disbursement																					
Mailing Address 7300 Lake Dr		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		3	0		2	0	0	5														
City West Des Moines	State IA	Zip Code 50266-2502																					
Purpose of Disbursement Bank Charges		Amount of Each Disbursement this Period <table border="1"><tr><td>5.30</td></tr></table>		5.30																			
5.30																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/ Type																					
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																							
State: District: N																							

Full Name (Last, First, Middle Initial) <b>B. Carter Printing</b>		Transaction ID: D16974 Date of Disbursement																					
Mailing Address 1739 E Grand Ave		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	0		2	0	0	5														
City Des Moines	State IA	Zip Code 50316-3611																					
Purpose of Disbursement Programs for FR Event		Amount of Each Disbursement this Period <table border="1"><tr><td>190.80</td></tr></table>		190.80																			
190.80																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/ Type																					
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																							
State: District: N																							

Full Name (Last, First, Middle Initial) <b>C. Carter Printing</b>		Transaction ID: D16940 Date of Disbursement																					
Mailing Address 1739 E Grand Ave		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	8		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		2	8		2	0	0	5														
City Des Moines	State IA	Zip Code 50316-3611																					
Purpose of Disbursement Invitations for Fundraising Event		Amount of Each Disbursement this Period <table border="1"><tr><td>137.80</td></tr></table>		137.80																			
137.80																							
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/ Type																					
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																							
State: District:																							

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>333.90</td></tr></table>	333.90
333.90		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 63

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Voter Activation Network</b>		<b>Transaction ID:</b> D16960 Date of Disbursement
Mailing Address 54 Regent St		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2005"/>
City Cambridge	State MA	Zip Code 02140-2112
Purpose of Disbursement Voter File Update	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="text" value="3100.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District: N		

Full Name (Last, First, Middle Initial) <b>B. Eric Lee Bakker</b>		<b>Transaction ID:</b> D16941 Date of Disbursement
Mailing Address 300 Walnut St Unit 114		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2005"/>
City Des Moines	State IA	Zip Code 50309-2242
Purpose of Disbursement Reimbursement - Beverages for a FR Event	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="text" value="9.66"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		<b>Transaction ID:</b> D16944 Date of Disbursement
Mailing Address 1165 2nd Ave		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>
City Des Moines	State IA	Zip Code 50318-9704
Purpose of Disbursement Postage for a Fundraising Event	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name	Category/ Type	<input type="text" value="74.00"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District: N		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3183.66"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 63

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		<b>Transaction ID: D16952</b> Date of Disbursement MM / DD / YYYY 06 / 10 / 2005
Mailing Address 1165 2nd Ave		Amount of Each Disbursement this Period 1445.29
City Des Moines	State IA Zip Code 50318-9704	
Purpose of Disbursement Postage for a Fundraising Event Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. West Bank</b>		<b>Transaction ID: D16983</b> Date of Disbursement MM / DD / YYYY 06 / 30 / 2005
Mailing Address PO Box 65020		Amount of Each Disbursement this Period 32.54
City West Des Moines	State IA Zip Code 50265-0020	
Purpose of Disbursement Bank Charges Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. The Des Moines Embassy Club</b>		<b>Transaction ID: D16959</b> Date of Disbursement MM / DD / YYYY 06 / 10 / 2005
Mailing Address 801 Grand Ave Ste 4000		Amount of Each Disbursement this Period 331.52
City Des Moines	State IA Zip Code 50309-8000	
Purpose of Disbursement Century Club Breakfast Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1809.35
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 63

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Paymentech</b>		Transaction ID: D16945 Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2005	
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 127.71	
City Hagerstown State MD Zip Code 21741-6600	Purpose of Disbursement Credit Card Processing Fees	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		N	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

127.71

**TOTAL** This Period (last page this line number only) ..... ▶

18470.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. ART SMALL FOR SENATE</b>		Transaction ID: D16990																					
Mailing Address PO Box 710		Date of Disbursement																					
City Iowa City State IA Zip Code 52244-0710		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		3	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		3	0		2	0	0	5														
Purpose of Disbursement Debt Reduction		Amount of Each Disbursement this Period																					
Candidate Name Art Small for Senate		<table border="1"> <tr> <td colspan="10" style="text-align: right;">200.00</td> </tr> </table>		200.00																			
200.00																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: IA District:		<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
		<input type="checkbox"/> Category/ Type																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>200.00</b>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 / 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) Steve Wilson		<b>Transaction ID:</b> D16995 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5	
Mailing Address 4409 White Pine Dr NE		<b>Amount of Each Disbursement this Period</b> 400.00	
City Cedar Rapids	State IA	Zip Code 52402-2241	Category/ Type
Purpose of Disbursement Contribution Refund			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
<b>B.</b> Full Name (Last, First, Middle Initial) Suresh Basnet		<b>Transaction ID:</b> D16997 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 4 / 2 0 0 5	
Mailing Address 1816 Bever Avenue SE		<b>Amount of Each Disbursement this Period</b> 50.00	
City Cedar Rapids	State IA	Zip Code 52403-2632	Category/ Type
Purpose of Disbursement Contribution Refund			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

450.00

**TOTAL** This Period (last page this line number only) ..... ▶

450.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Iowa Democratic Party - State Account</b>		<b>Transaction ID: D16991</b>																					
Mailing Address 5661 Fleur Dr		Date of Disbursement																					
City Des Moines State IA Zip Code 50321-2841		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	8		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		0	8		2	0	0	5														
Purpose of Disbursement Transfer to Non-Federal Account		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>		5000.00																			
5000.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																					
State: District:																							

Full Name (Last, First, Middle Initial) <b>B. Iowa Democratic Party - State Account</b>		<b>Transaction ID: D16992</b>																					
Mailing Address 5661 Fleur Dr		Date of Disbursement																					
City Des Moines State IA Zip Code 50321-2841		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	9		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y														
0	6		0	9		2	0	0	5														
Purpose of Disbursement Transfer to Non-Federal Account		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">20000.00</td> </tr> </table>		20000.00																			
20000.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type																					
State: District:																							

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

<b>25000.00</b>
-----------------

**TOTAL** This Period (last page this line number only) ..... ►

<b>25000.00</b>
-----------------

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Travis Brock</b>		<b>Transaction ID: D16969</b> Date of Disbursement 06 / 15 / 2005	
Mailing Address 528 E 6th St		Amount of Each Disbursement this Period 1407.56	
City Des Moines State IA Zip Code 50309-1918	Purpose of Disbursement Payroll Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	N	

Full Name (Last, First, Middle Initial) <b>B. Travis Brock</b>		<b>Transaction ID: D16971</b> Date of Disbursement 06 / 17 / 2005	
Mailing Address 528 E 6th St		Amount of Each Disbursement this Period 220.59	
City Des Moines State IA Zip Code 50309-1918	Purpose of Disbursement Mileage Reimbursement Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	N	

Full Name (Last, First, Middle Initial) <b>C. Travis Brock</b>		<b>Transaction ID: D16986</b> Date of Disbursement 06 / 30 / 2005	
Mailing Address 528 E 6th St		Amount of Each Disbursement this Period 1407.57	
City Des Moines State IA Zip Code 50309-1918	Purpose of Disbursement Payroll Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	N	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3035.72</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Michael Milligan</b>		Transaction ID: D16964 Date of Disbursement 06 / 13 / 2005	
Mailing Address 101 30th St		Amount of Each Disbursement this Period 70.20	
City Des Moines State IA Zip Code 50312	Purpose of Disbursement Reimbursement for Mileage	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>B. Michael Milligan</b>		Transaction ID: D16967 Date of Disbursement 06 / 15 / 2005	
Mailing Address 101 30th St		Amount of Each Disbursement this Period 2509.77	
City Des Moines State IA Zip Code 50312	Purpose of Disbursement Payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>C. Michael Milligan</b>		Transaction ID: D16984 Date of Disbursement 06 / 30 / 2005	
Mailing Address 101 30th St		Amount of Each Disbursement this Period 2509.76	
City Des Moines State IA Zip Code 50312	Purpose of Disbursement Payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5089.73</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 46 / 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Wellmark</b>		Transaction ID: D16973 Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2005	
Mailing Address PO Box 10353		Amount of Each Disbursement this Period 1205.56	
City Des Moines State IA Zip Code 50306-0353	Purpose of Disbursement Health Insurance Premiums	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>B. Molly Marie Scherrman</b>		Transaction ID: D16968 Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2005	
Mailing Address 3918 Lincoln Place Dr		Amount of Each Disbursement this Period 1141.25	
City Des Moines State IA Zip Code 50312	Purpose of Disbursement Payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>C. Molly Marie Scherrman</b>		Transaction ID: D16985 Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2005	
Mailing Address 3918 Lincoln Place Dr		Amount of Each Disbursement this Period 1141.25	
City Des Moines State IA Zip Code 50312	Purpose of Disbursement Payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Candidate Name	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3488.06
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 63

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

Full Name (Last, First, Middle Initial) <b>A. Treasurer, State of Iowa</b>		<b>Transaction ID: D16947</b> Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2005
Mailing Address PO Box 10412		Amount of Each Disbursement this Period 65.00
City Des Moines	State IA Zip Code 50306-0412	
Purpose of Disbursement State Withholding Taxes Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Internal Revenue Service</b>		<b>Transaction ID: D16970</b> Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2005
Mailing Address SERVICE Center		Amount of Each Disbursement this Period 2365.00
City Ogden	State UT Zip Code 84201-0039	
Purpose of Disbursement Federal Payroll Taxes Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

2430.00

**TOTAL** This Period (last page this line number only) .....

14043.51

**SCHEDULE D (FEC Form 3X)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 48 / 63	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 IOWA DEMOCRATIC PARTY

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Iowa Democratic Party - State Account	Nature of Debt (Purpose): Transfer of excessive contribution
Mailing Address 5661 Fleur Dr	
City State ZIP Code Des Moines IA 50321-2841	

Outstanding Balance Beginning This Period	<b>Transaction ID: D26645</b>	
2000.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2000.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	2000.00
2) <b>TOTALS</b> This Period (last page this line number only).....	2000.00
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE H3 (FEC Form 3X)  
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR  
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
 IOWA DEMOCRATIC PARTY

NAME OF ACCOUNT NF In-Kind Rec'd from SEIU Local 199	DATE OF RECEIPT M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 750.00
---	---	------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		750.00
i) Total Administrative .....		Transaction ID: T22
ii) Generic Voter Drive .....		Transaction ID:
iii) Exempt Activities .....		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising .....		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support .....		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative) .....	750.00
TOTAL This Period (Generic Voter Drive) .....	0.00
TOTAL This Period (Exempt Activities) .....	0.00
TOTAL This Period (Direct Fundraising) .....	0.00
TOTAL This Period (Direct Candidate Support) .....	0.00
TOTAL This Period (Public Communications Referring Only to Party) .....	0.00
TOTAL This Period (Total Amount Transferred) .....	750.00

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Full Name (Last, First, Middle Initial)</b> Wandro, Baer & Appel, P.C.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2501 Grand Ave   Ste B			Allocated Activity or Event Year-To-Date 102686.40		
City Des Moines	State IA	Zip Code 50312-5342	Date <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Legal Fees			Transaction ID: D16961H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
749.04		4244.56		4993.60

<b>B. Full Name (Last, First, Middle Initial)</b> Mid American Energy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8020			Allocated Activity or Event Year-To-Date 102686.40		
City Davenport	State IA	Zip Code 52808-8020	Date <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Utilities			Transaction ID: D16953H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.46		370.99		436.45

<b>C. Full Name (Last, First, Middle Initial)</b> Waste Connections			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Des Moines District 3071   Dept. 1433			Allocated Activity or Event Year-To-Date 102686.40		
City Los Angeles	State CA	Zip Code 90084-1433	Date <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Trash Removal			Transaction ID: D16962H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
33.22		188.31		221.53

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
847.72		4803.86		5651.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Full Name (Last, First, Middle Initial)</b> Qwest			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 91104			Allocated Activity or Event Year-To-Date 102686.40		
City Seattle	State WA	Zip Code 98111-9204	Date <input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Local Telephone Service			Transaction ID: D16957H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.98		101.90		119.88

<b>B. Full Name (Last, First, Middle Initial)</b> Fleur Mini Storage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1900 Hackley Ave			Allocated Activity or Event Year-To-Date 102686.40		
City Des Moines	State IA	Zip Code 50315-4478	Date <input type="text" value="06"/> / <input type="text" value="20"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Storage Unit			Transaction ID: D16978H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.15		80.19		94.34

<b>C. Full Name (Last, First, Middle Initial)</b> UPS			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 577			Allocated Activity or Event Year-To-Date 102686.40		
City Carol Stream	State IL	Zip Code 60132-0001	Date <input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Shipping			Transaction ID: D16951H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.95		33.76		39.71

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.08		215.85		253.93

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Full Name (Last, First, Middle Initial)</b> West Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 65020			Allocated Activity or Event Year-To-Date 102686.40	
City West Des Moines	State IA	Zip Code 50265-0020	Date MM / DD / YYYY 06 / 03 / 2005	
Purpose of Disbursement: Bank Bag			Transaction ID: D16946H4	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.25		12.75		15.00

<b>B. Full Name (Last, First, Middle Initial)</b> Melissa B Watson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 4312 Kingman Blvd			Allocated Activity or Event Year-To-Date 102686.40	
City Des Moines	State IA	Zip Code 50311-3418	Date MM / DD / YYYY 06 / 30 / 2005	
Purpose of Disbursement: Cell Phone Reimb/NF Allocable Expense			Transaction ID: D17187H4	
Activity or Event Identifier: Administrative <b>[MEMO ITEM]</b>				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

<b>C. Full Name (Last, First, Middle Initial)</b> Travis Brock			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 528 E 6th St			Allocated Activity or Event Year-To-Date 102686.40	
City Des Moines	State IA	Zip Code 50309-1918	Date MM / DD / YYYY 06 / 30 / 2005	
Purpose of Disbursement: Cell Phone Reimbursement			Transaction ID: D16987H4	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.00		34.00		40.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Full Name (Last, First, Middle Initial)</b> Michael Milligan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 30th St			Allocated Activity or Event Year-To-Date 102686.40		
City Des Moines	State IA	Zip Code 50312	Date MM / DD / YYYY 06 / 30 / 2005		
Purpose of Disbursement: Cell Phone Reimbursement			Transaction ID: D16988H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

<b>B. Full Name (Last, First, Middle Initial)</b> Michael Milligan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 30th St			Allocated Activity or Event Year-To-Date 102686.40		
City Des Moines	State IA	Zip Code 50312	Date MM / DD / YYYY 06 / 13 / 2005		
Purpose of Disbursement: Reimbursement for Meals			Transaction ID: D16965H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.25		103.45		121.70

<b>C. Full Name (Last, First, Middle Initial)</b> Michael Milligan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 101 30th St			Allocated Activity or Event Year-To-Date 102686.40		
City Des Moines	State IA	Zip Code 50312	Date MM / DD / YYYY 06 / 03 / 2005		
Purpose of Disbursement: Reimbursement for Easels			Transaction ID: D16948H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.43		183.77		216.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.43		308.47		362.90

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Full Name (Last, First, Middle Initial)</b> Stroh Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 5000 Park Ave			Allocated Activity or Event Year-To-Date 102686.40																						
City	State	Zip Code	Category/ Type																						
Des Moines	IA	50321-1245																							
Purpose of Disbursement: HVAC Maintenance Contract			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	1	0	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	6	/	1	0	/	2	0	0	5																
Activity or Event Identifier: Administrative			Transaction ID: D16958H4																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.59		241.35		283.94

<b>B. Full Name (Last, First, Middle Initial)</b> Orchid Suites			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2001 S. Street, NW			Allocated Activity or Event Year-To-Date 102686.40																						
City	State	Zip Code	Category/ Type																						
Washington	DC	20009																							
Purpose of Disbursement: Website Maintenance			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	1	0	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	6	/	1	0	/	2	0	0	5																
Activity or Event Identifier: Administrative			Transaction ID: D16954H4																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.25		46.75		55.00

<b>C. Full Name (Last, First, Middle Initial)</b> Pitney Bowes			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address PO Box 856390			Allocated Activity or Event Year-To-Date 102686.40																						
City	State	Zip Code	Category/ Type																						
Louisville	KY	40285-6390																							
Purpose of Disbursement: Mailing Equipment Lease			Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	1	0	/	2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y																
0	6	/	1	0	/	2	0	0	5																
Activity or Event Identifier: Administrative			Transaction ID: D16955H4																						

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
132.28		749.64		881.92

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
183.12		1037.74		1220.86

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
The New Iowa Bystander

Mailing Address  
813 25th St

City State Zip Code  
Des Moines IA 50312-4814

Purpose of Disbursement:  
Employment Advertisement

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

102686.40

Date 06 / 20 / 2005

Transaction ID: D16979H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.00		204.00		240.00

**B. Full Name (Last, First, Middle Initial)**  
Polk County Democratic Central Committ

Mailing Address  
317 6th Ave Ste 1200

City State Zip Code  
Des Moines IA 50309-4112

Purpose of Disbursement:  
Booth Rental

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

102686.40

Date 06 / 28 / 2005

Transaction ID: D16982H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.25		63.75		75.00

**C. Full Name (Last, First, Middle Initial)**  
Qwest Business

Mailing Address  
PO Box 856169

City State Zip Code  
Louisville KY 40285-6169

Purpose of Disbursement:  
Long Distance Service

Category/  
Type

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

102686.40

Date 06 / 03 / 2005

Transaction ID: D16949H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
34.62		196.19		230.81

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.87		463.94		545.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Full Name (Last, First, Middle Initial)</b> Storey Kenworthy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 309 Locust St			Allocated Activity or Event Year-To-Date 102686.40		
City	State	Zip Code	Category/ Type		
Des Moines	IA	50309-1723			
Purpose of Disbursement: Office Supplies			Date <input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: D16950H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.68		145.58		171.26

<b>B. Full Name (Last, First, Middle Initial)</b> United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1165 2nd Ave			Allocated Activity or Event Year-To-Date 102686.40		
City	State	Zip Code	Category/ Type		
Des Moines	IA	50318-9704			
Purpose of Disbursement: Stamps			Date <input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: D16943H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.70		219.30		258.00

<b>C. Full Name (Last, First, Middle Initial)</b> Iowa Democratic Party - State Account			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5661 Fleur Dr			Allocated Activity or Event Year-To-Date 102686.40		
City	State	Zip Code	Category/ Type		
Des Moines	IA	50321-2841			
Purpose of Disbursement: Transfer to Non-Federal for In-kind			Date <input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: D16994H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
750.00		0.00		750.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
814.38		364.88		1179.26

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

**A. Full Name (Last, First, Middle Initial)**  
Iowa Democratic Party - State Account

Mailing Address  
5661 Fleur Dr

City	State	Zip Code
Des Moines	IA	50321-2841

Purpose of Disbursement:  
NF Share of In-Kind Rec'd

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
102686.40

Date  /  /   
**Transaction ID:** D16996H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		750.00		750.00

**B. Full Name (Last, First, Middle Initial)**  
Raymond Brown

Mailing Address  
1630- 21st Street

City	State	Zip Code
Des Moines	IA	50312-4818

Purpose of Disbursement:  
Lawn Service

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
102686.40

Date  /  /   
**Transaction ID:** D16972H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.75		38.25		45.00

**C. Full Name (Last, First, Middle Initial)**  
Wells Fargo Financial Leasing

Mailing Address  
PO Box 6434

City	State	Zip Code
Carol Stream	IL	60197-6434

Purpose of Disbursement:  
Lease for Copier

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
102686.40

Date  /  /   
**Transaction ID:** D16981H4

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.68		485.54		571.22

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
92.43		1273.79		1366.22

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Full Name (Last, First, Middle Initial)</b> Donna L Latessa			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 447 Scandia Ave			Allocated Activity or Event Year-To-Date 102686.40		
City Des Moines	State IA	Zip Code 50315-3661	Date MM / DD / YYYY 06 / 13 / 2005		
Purpose of Disbursement: Kitchen Supplies			Transaction ID: D16963H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.17		40.65		47.82

<b>B. Full Name (Last, First, Middle Initial)</b> Verizon			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 25506			Allocated Activity or Event Year-To-Date 102686.40		
City Lehigh Valley	State PA	Zip Code 18002	Date MM / DD / YYYY 06 / 20 / 2005		
Purpose of Disbursement: Cell Phone Service			Transaction ID: D16980H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.96		39.50		46.46

<b>C. Full Name (Last, First, Middle Initial)</b> Political C.F.O.'s			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6715 Williams Dr			Allocated Activity or Event Year-To-Date 102686.40		
City Alexandria	State VA	Zip Code 22307-1669	Date MM / DD / YYYY 06 / 10 / 2005		
Purpose of Disbursement: Compliance Consulting Fees			Transaction ID: D16956H4		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
565.31		3203.44		3768.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
579.44		3283.59		3863.03

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
IOWA DEMOCRATIC PARTY

<b>A. Full Name (Last, First, Middle Initial)</b> Molly Marie Scherrman			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3918 Lincoln Place Dr			Allocated Activity or Event Year-To-Date 102686.40		
City Des Moines	State IA	Zip Code 50312	Date MM / DD / YYYY 06 / 30 / 2005		
Purpose of Disbursement: Cell Phone Reimbursement			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: D16989H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75		21.25		25.00

<b>B. Full Name (Last, First, Middle Initial)</b> FedEx Kinko's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 672085			Allocated Activity or Event Year-To-Date 102686.40		
City Dallas	State TX	Zip Code 75267-2085	Date MM / DD / YYYY 06 / 20 / 2005		
Purpose of Disbursement: Mounted Poster Boards			Category/ Type		
Activity or Event Identifier: Administrative			Transaction ID: D16977H4		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.04		323.29		380.33

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
60.79		344.54		405.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
2758.26		12130.66		14888.92

Form/Schedule: **F3XA**

Transaction ID:

Please note that this is a conforming amendment to carry through corrections made to reports filed during the 2004 election cycle. Column B corrections have been made for lines 11(a)(i) and 11(a)(ii). Regarding Steve Wilson's aggregate year-to-date totals, please see Schedule B for Line 28A. Steve Wilson's year-to-date aggregate was reported correctly. Although there were limited payments for administrative expenses reported in our May, June and July monthly reports, all administrative expenses were included. No payments for administrative expenses were made from the Committee's non-federal account. Further, the employees that exceeded the 25% threshold for work in connection with a federal election were reported correctly on the June and July monthly reports. No employee exceeded the threshold for the period covered by the May monthly report. Regarding expenditures made for 'programs for FR event, Invitations for FR event, Catering for FR event, and Postage for FR event,' these expenditures were for the Committee's federal fundraising activity. None of these activities were for any specifically identified federal candidate. Transfers reported on line 29 to the Iowa Democratic Party-State Fund were transfers to the Committee's non-federal account. These transfers were not to affiliated committees and were correctly reported.

Form/Schedule: **SB29**

Transaction ID: **D16991**

Transfer for Non-Federal of Mid-Atlantic PAC's (MAPAC) contribution received Oct. 24, 2004, as requested by donor.

**Image# 27930988693**

Form/Schedule: **SB29**      Transfer for Non-Federal payroll due to lack on Non-Federal funds.  
Transaction ID: **D16992**

Form/Schedule: **H3**      Represents Non-Federal In-Kind received for 100% Federal fundraising event.  
Transaction ID: **T22**

\*\*\*\*\*

**Image# 27930988694**

Form/Schedule: **SH4** Represents Transfer of Federal Funds for Non-Federal In-kind received for 100% Federal fundraising event.  
Transaction ID: **D16994H4**

Form/Schedule: **SA17** Represents State Income Tax Checkoff Revenue.  
Transaction ID: **C62735**

\*\*\*\*\*

**Image# 27930988695**

Form/Schedule: **SH4**      See Schedule B for Line 21b, payment to non-federal account in the amount of \$439.27.  
Transaction ID: **D17187H4**

\*\*\*\*\*