

FOR INSTRUCTIONS, SEE BACK OF FORM

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DISCLOSURE SUMMARY PAGE

Appanoose

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

IMPORTANT: Indicate by # type of committee you are reporting for: 5
 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Political Party Candidate (7) School Board or Other
 Political Subdivision Candidate (8) County Political Party Candidate (9) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name: Teddy J. Walker Political Party (if applicable): Republican

Office Sought: Appanoose County Recorder District (if Senate or House): _____

**ETHICS & CAMPAIGN
DISCLOSURE BOARD**

JUL 18 2006
PM 7:17:06
FILED

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	Logged In _____
Scanned _____	Computer _____
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Gerald Bonds 641-437-4275 July 16, 2006
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A Disclosure REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED _____

Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election November 7, 2006
County & Local Committees, enter County in which Election is held Appanoose

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)	133.67
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1,145.00
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	1,278.67
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	410.55
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	868.12
**UNPAID BILLS (From Schedule D - Attach Schedule D)	-0-
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	34.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO
CANDIDATE COMMITTEES ONLY:	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ _____

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

For Instructions, See Back of Form

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

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
06-05-06	ID# CK#	Diane Buss 402 E Maple Centerville, IA 52544		\$ 50	<input type="checkbox"/>
06-05-06	ID# CK#	William D. Buss 402 E. Maple Centerville, IA 52544		100	<input type="checkbox"/>
06-07-06	ID# CK#	Russell Warren 27238 591st St. Moulton, IA 52572		20	<input type="checkbox"/>
06-15-06	ID# CK#	Larry and Brenda Strickling 863 Mikels Dr. Centerville, IA 52544		25	<input type="checkbox"/>
06-16-06	ID# CK#	Gary and Dorothy Barrickman 22036 230th Ave. Centerville, IA 52544		20	<input type="checkbox"/>
06-16-06	ID# CK#	Roy and Vickie Spurgeon 19436 205th Ave. Centerville, IA 52544		25	<input type="checkbox"/>
06-16-06	ID# CK#	Nelma Fuller 19486 Hwy T14 Mystic, IA 52574		25	<input type="checkbox"/>
06-16-06	ID# CK#	James and Ginger Craver 717 N. 18th St. Centerville, IA 52544		25	<input type="checkbox"/>
06-16-06	ID# CK#	Bruce and Peggy Kimmerle 415 Haynes Ave. Centerville, IA 52544		25	<input type="checkbox"/>
06-17-06	ID# CK#	Dr. Dick and Sharon Cooper 850 Mikels Dr. Centerville, IA 52544		25	<input type="checkbox"/>
SUB-TOTAL				\$ 340	
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

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CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Walker for Recorder

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
06-17-06	ID# CK#	Wilbur and Joyce Rush 509 S. Main Centerville, IA 52544		\$ 10	<input type="checkbox"/>
06-18-06	ID# CK#	Kendell and Dorothy Oden 26936 Hwy T30 Exline, IA 52555		20	<input type="checkbox"/>
06-19-06	ID# CK#	Larry and Carol Drake 24366 570th St. Centerville, IA 52544		50	<input type="checkbox"/>
06-19-06	ID# CK#	MIKE and TERRI Seay 1105 W. Van Buren Centerville, IA 52544		100	<input type="checkbox"/>
06-19-06	ID# CK#	Bob Rosencrants 200 N. 12th St. Centerville, IA 52544		25	<input type="checkbox"/>
06-19-06	ID# CK#	Joe and Mary Ann Wetmore 17796 200th Ave. Centerville, IA 52544		20	<input type="checkbox"/>
06-19-06	ID# CK#	Tom and Janet Demry 19279 Hwy 2 Centerville, IA 52544		50	<input type="checkbox"/>
06-22-06	ID# CK#	John Roby Box 114 Mystic, IA 52574		20	<input type="checkbox"/>
06-22-06	ID# CK#	Rex Peterson 15746 113th Ave. Plano, IA 52581		20	<input type="checkbox"/>
06-23-06	ID# CK#	Betty Owca 714 W. Wall Centerville, IA 52544		25	<input type="checkbox"/>
SUB-TOTAL				\$ 680	
TOTAL (If last page of this schedule)				\$	

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
06-23-06	ID# CK#	Larry and Coleen Cook 503 N. Vine Moulton, IA 52572		\$ 20	<input type="checkbox"/>
06-23-06	ID# CK#	Virginia Padovan 907 W. State Centerville, IA 52544		15	<input type="checkbox"/>
06-23-06	ID# CK#	Donald and Kay Hanson 822 S. 12th St. Centerville, IA 52544		20	<input type="checkbox"/>
06-24-06	ID# CK#	Loren and Wilma Eddy 23705 497th St. Centerville, IA 52544		50	<input type="checkbox"/>
07-01-06	ID# CK#	Richard and Lana Bratz 1104 E. Wall St. Centerville, IA 52544		25	<input type="checkbox"/>
07-01-06	ID# CK#	Robert Underwood 122 N. 13th St. Centerville, IA 52544		10	<input type="checkbox"/>
07-01-06	ID# CK#	Scott and Jackie Kelly 416 E. Maple St. Centerville, IA 52544		20	<input type="checkbox"/>
07-05-06	ID# CK#	Dave and Ruth Taylor 17613 Hwy J29 Centerville, IA 52544		25	<input type="checkbox"/>
07-10-06	ID# CK#	Merle and Barbara Houser 920 Woodland View Dr. Centerville, IA 52544		10	<input type="checkbox"/>
07-10-06	ID# CK#	Connie Drake Box 367 Centerville, IA 52544		100	<input type="checkbox"/>
SUB-TOTAL				\$ 975	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND-RAISER INCOME
06-26-06	ID# CK#	Tom and Kathy Lange 800 W. Lane St. Centerville, IA 52544		\$ 50	<input type="checkbox"/>
06-26-06	ID# CK#	Lawrence and Dorothy Powell 803 Maple St. Udell, IA 52593		20	<input type="checkbox"/>
07-12-06	ID# CK#	Carl Cisler 714 S. 18th St. Centerville, IA 52544		50	<input type="checkbox"/>
07-13-06	ID# CK#	Ann and Jeff Young 20078 205th Ave. Centerville, IA 52544		50	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				1,145	
TOTAL (if last page of this schedule)				\$ 1,145	
				\$ 1,145	

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

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

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05-23-06	ID# CK#	Daily Iowegian 105 N. Main St. Centerville, IA 52544	Political Advertisement	\$ 77.60
05-24-06	ID# CK#	Moravia Union & Moulton Tribune PO Box 338 Albia, IA 52531	Political Advertisement	33.20
06-09-06	ID# CK#	Daily Iowegian 105 N. Main St. Centerville, IA 52544	Thank You Ad	30.80
06-09-06	ID# CK#	U. S. Post Office 300 N. 10th St. Centerville, IA 52544	Stamps	74.00
06-21-06	ID# CK#	Donahue 11205 Helber Road Logan, Ohio 43138	1000 Pens	194.95
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 410.55
TOTAL (if last page of this schedule)				\$ 410.55

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
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SCHEDULE E <small>(Rev. 06/97)</small>	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
06-09-06	Sally Banks 25233 Hwy 5 Centerville, IA 52544	Mother	Stamps	\$ 4.00	<input type="checkbox"/>
06-28-06	Teddy Walker 19585 160th Ave. Mystic, IA 52574	Self	Parade Candy	30.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$	34.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.