

*Black Hawk*

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. # <u>17944</u>	
Logged In _____	
Scanned _____	
Computer <u>DM</u>	
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

JUDY MCCARTHY FOR RECORDER

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**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 Candidate ( 6 ) City Candidate ( 7 ) School Board or Other  
 Political Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political  
 Subdivision PAC ( 11 ) Local Ballot Issue

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**CANDIDATE COMMITTEES ONLY:**

Candidate Name  
JUDY MCCARTHY

Office Sought  
BLACK HAWK COUNTY RECORDER

Political Party (if applicable)  
DEMOCRAT

District (if Senate or House)

MAY 16 2006 PM 5:15:06

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.

*Judy McCarthy*  
SIGNATURE OF PERSON FILING REPORT

319-235-9716  
TELEPHONE

5/14/2006  
DATE SIGNED

I AM FILING A MAY 19, 2006 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 <u>11/07/06</u>
County & Local Committees, enter County in which Election is held <u>BLACK HAWK</u>

## STATEMENT OF CASH ON HAND

<b>CASH ON HAND</b> at the beginning of the reporting period. (Total of all funds held by the committee. This amount <b>MUST</b> 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.)	\$ 0.00
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	736.01
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
<b>(Schedule H applies to Candidates' Committees Only)</b>	
<b>SUB-TOTAL</b>	\$
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	12.00
Schedule F: Loan Repayments total (Attach Schedule F)	
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 724.01
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$ 0.00
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$ 124.00
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO
<b>CANDIDATE COMMITTEES ONLY:</b>	
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$
<b>STATE COMMITTEES:</b> Submit a reconciled campaign account bank statement in January of each year.	

For Instructions, See Back of Form



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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

JUDY MCCARTHY 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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
04/22/06	ID# CK#	NORMA KLEINHEKSEL 3905 HUDSON RD CEDAR FALLS IA 50613	SISTER	\$50.00	<input type="checkbox"/>
04/22/06	ID# CK#	JOHN MILLER 4213 W SHAULIS RD CEDAR FALLS IA 50613		10.00	<input type="checkbox"/>
04/23/06	ID# CK#	SANDIE SMITH 2645 QUAIL AVE READLYN IA		100.00	<input type="checkbox"/>
04/29/06	ID# CK#	JON CREWS 4712 CHADWICK RD APT 1 CEDAR FALLS IA 50613		15.00	<input type="checkbox"/>
04/29/06	ID# CK#	BILL TEAFORD 3913 CARLTON DR CEDAR FALLS IA 50613		100.00	<input type="checkbox"/>
04/29/06	ID# CK#	JEFF RICKERT 735 CAMPBELL AVE WATERLOO IA 50701		3.00	<input type="checkbox"/>
05/01/06	ID# CK#	JUDITH HARRINGTON 3714 EASTPARK RD CEDAR FALLS IA 50613		28.00	<input type="checkbox"/>
05/01/06	ID# CK#	DR GILBERT MARTINEZ 12598 CENTRAL AVE STE D CHINO CA 91710	BROTHER IN L	25.00	<input type="checkbox"/>
05/01/06	ID# CK#	KALEY MARTINEZ PO BOX 23110 ENCINITAS CA 92023	SISTER	25.00	<input type="checkbox"/>
05/01/06	ID# CK#	KERRY MARTINEZ PO BOX 23110 ENCINITAS CA 92023	NIECE	25.00	<input type="checkbox"/>

SUB-TOTAL

\$ 381.00

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



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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

JUDY MCCARTHY 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
05/02/06	ID# CK#	BRUCE G ROGERS 2100 FOUR WINDS DR CEDAR FALLS IA 50613		\$5.00	<input type="checkbox"/>
05/02/06	ID# CK#	JO ANN FINKENBINDER 31 RIGER RIDGE RD CEDAR FALLS IA 50613		15.00	<input type="checkbox"/>
05/02/06	ID# CK#	DEBORAH DOWD 1913 BELLE AVE CEDAR FALLS IA 50613		34.00	<input type="checkbox"/>
05/03/06	ID# CK#	BOB PRINS 401 ARDMORE ST WATERLOO IA 50701		11.00	<input type="checkbox"/>
05/03/06	ID# CK#	E J GALLAGHER III 801 SHERIDAN RD WATERLOO IA 50701		28.00	<input type="checkbox"/>
05/03/06	ID# CK#	RUTH SCOGGIN 3921 HUDSON RD CEDAR FALLS IA 50613		10.00	<input type="checkbox"/>
05/03/06	ID# CK#	DIANE WILLIAMS 220 EUCLID AVE WATERLOO IA 50701		25.00	<input type="checkbox"/>
05/04/06	ID# CK#	JANICE LITTLE 231 RIVER FOREST RD EVANS DALE IA 50707		25.00	<input type="checkbox"/>
05/05/06	ID# CK#	BRUCE BRALEY PO BOX 810 WATERLOO IA 50704		25.00	<input type="checkbox"/>
050506	ID# CK#	JUDY MILLS 5912 A-B AVE WATERLOO IA 50701		26.00	<input type="checkbox"/>

SUB-TOTAL

\$ 204.00

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form



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

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

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

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
05/07/06	ID# CK#	ROGER WILLIAMS 1108 BOBBI LANE WATERLOO IA 50701		\$20.00	<input type="checkbox"/>
05/08/06	ID# CK#	JAMES CHAPMAN 73450 COUNTRY CLUB DR 241 PALM DESERT CA 92260		25.00	<input type="checkbox"/>
05/08/06	ID# CK#	EDWARD J GALLAGHER JR 800 PROSPECT BLVD WATERLOO IA 50701		25.00	<input type="checkbox"/>
05/12/06	ID# CK#	ROGER WHITE 2303 GREENWOOD AVE CEDAR FALLS IA 50613		31.00	<input type="checkbox"/>
05/12/06	ID# CK#	BARBARA SCHAFER 831 PROGRESS AVE WATERLOO IA 50701		15.00	<input type="checkbox"/>
05/13/06	ID# CK#	COLIN OCONNELL 1129 BARNETT DR CEDAR FALLS IA 50613		10.00	<input type="checkbox"/>
05/13/06	ID# CK#	VIKKI SCHMIDT 801 EASTON AVE WATERLOO IA 50702		25.00	<input type="checkbox"/>
05/13/06	ID# CK#	INTEREST		.01	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 151.01	
<b>TOTAL (if last page of this schedule)</b>				\$ 736.01	

\* 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.

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

<b>SCHEDULE</b> <b>B</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)*  
 JUDY MCCARTHY FOR RECORDER

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE <i>(Disbursement)</i> WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
04/29/06	ID# CK#	VERIDIAN CREDIT UNION PO BOX 6000 WATERLOO IA 50704	PRINTING OF CHECKS	\$ 12.00
	ID# CK#			
<b>SUB-TOTAL</b>				\$ 12.00
<b>TOTAL (if last page of this schedule)</b>				\$ 12.00

**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)  
 JUDY MCCARTHY FOR RECORDER



SCHEDULE <b>E</b> (Rev. 06/97)	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
04/15/06	JUDY MCCARTHY 810 PROGRESS AVE WATERLOO IA 50701	SELF	RUBBER STAMPS AND POSTAGE	\$ 76.00	<input type="checkbox"/>
04/20/06	NORMA KLEINHEKSEL 3905 HUDSON RD CEDAR FALLS IA 50613	SISTER	ENVELOPES	4.00	<input type="checkbox"/>
4/20/06	PATRICIA S SASS 2551 KATE ST WATERLOO IA 50701		ENVELOPES AND STAMPS	44.00	<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				\$ 124.00	
TOTAL (if last page of this schedule)				\$ 124.00	

\*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.