

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

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

Elect Kriss Phillips for Mayor Committee

IMPORTANT: Indicate by # type of committee you are reporting for: 11
 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name Kriss Phillips Political Party (if applicable) _____
 Office Sought Mayor District (if Senate or House) _____

NOV 7 2005

Late reports are subject to possible civil and criminal penalties.

[Signature] 515-230-6941 11-3-05
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A November 3, 2005 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
11-8-05
 County & Local Committees, enter County in which Election is held
Bacon

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.)	\$	<u>0</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>5616.90</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>-</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>-</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
	SUB-TOTAL	\$ <u>5616.90</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>4573.93</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>-</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>1042.97</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>-</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>100.00</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>-</u>
CONSULTANT BREAKDOWN (Schedule G Attached?) <u>N/A</u> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>-</u>

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

For Instructions, See Back of Form

Reset Form

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)
Elect Kris Phillips for Mayor Committee

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
10/12/05	ID# CK#	Dr. Wayne Rouse 628 S Boone Street Boone IA 50036		\$ 100.00	<input type="checkbox"/>
10/14/05	ID# CK#	John Hansen 1119 Country Club Drive Boone IA 50036		25.00	<input type="checkbox"/>
10/16/05	ID# CK#	Linda Bravard 922 Southridge Drive Boone IA 50036		75.00	<input type="checkbox"/>
10/18/05	ID# CK#	Holly Larson 906 Southridge Drive Boone IA 50036		50.00	<input type="checkbox"/>
10/17/05	ID# CK#	Sally Couster 610 Prairie Avenue Boone IA 50036		50.00	<input type="checkbox"/>
10/16/05	ID# CK#	David Grant 832 L Avenue Boone IA 50036		200.00	<input type="checkbox"/>
10/19/05	ID# CK#	Steve Kruck 227 S Tama Boone IA 50036		500.00	<input type="checkbox"/>
10/17/05	ID# CK#	Randy Schmitz 1120 Southview Ct Boone IA 50036		50.00	<input type="checkbox"/>
10/17/05	ID# CK#	Louis Greco 325 S Story Street Boone IA 50036		50.00	<input type="checkbox"/>
10/18/05	ID# CK#	Lisa Kobernusz 1409 Aldrich Avenue Boone IA 50036		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1200.00	
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

Reset Form

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)
Elect Kriss Phillips for Mayor Committee

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
10/19/05	ID# CK#	Michael Keraus 233 S Story Street Boone IA 50036		\$ 50.00	<input type="checkbox"/>
10/19/05	ID# CK#	Tom Crooks 1709 Benton Street Boone IA 50036		100.00	<input type="checkbox"/>
10/19/05	ID# CK#	Kevin Miles 203 S Cedar Street Boone IA 50036		250.00	<input type="checkbox"/>
10/19/05	ID# CK#	Ivette Bender 1166 Jonquil LN Boone IA 50036		100.00	<input type="checkbox"/>
10/19/05	ID# CK#	George Eckstein P O Box 11 Boone IA 50036		100.00	<input type="checkbox"/>
10/19/05	ID# CK#	Bill Currans 1322 SE Lim Street Boone IA 50036		100.00	<input type="checkbox"/>
10/19/05	ID# CK#	Elaine Anderson 1104 Country Club Drive Boone IA 50036		100.00	<input type="checkbox"/>
10/19/05	ID# CK#	Robert Flynn 503 S Linden Lane Boone IA 50036		250.00	<input type="checkbox"/>
10/20/05	ID# CK#	Tray Thompson 1245 Knapp Pl Boone IA 50036		50.00	<input type="checkbox"/>
10/20/05	ID# CK#	Richard Hansen 212 W 4th Street Boone IA 50036		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1200.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

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)
Elect Kriss Philips for Mayor Committee

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
10/20/05	ID# CK#	Jess Anderson 205 Storm Street Boone IA 50036		\$150.00	<input type="checkbox"/>
10/20/05	ID# CK#	Jack Knight 1727 Division Street Boone IA 50036		25.00	<input type="checkbox"/>
10/20/05	ID# CK#	Wayne Koos 1668 220th Street Boone IA 50036		100.00	<input type="checkbox"/>
10/21/05	ID# CK#	Jim Henkel 325 Linn Street Boone IA 50036		100.00	<input type="checkbox"/>
10/21/05	ID# CK#	George Maybee 1216 Country Club Drive Boone IA 50036		100.00	<input type="checkbox"/>
10/21/05	ID# CK#	Kriss Philips 909 Southridge Drive Boone IA 50036	Candidate	100.00	<input type="checkbox"/>
10/21/05	ID# CK#	Jess Putzner 210 Ashwood Ct Boone IA 50036		25.00	<input type="checkbox"/>
10/21/05	ID# CK#	Fred Greiner 622 Southridge Drive Boone IA 50036		100.00	<input type="checkbox"/>
10/21/05	ID# CK#	Mike Mahoney 1417 Oakridge Boone IA 50036		100.00	<input type="checkbox"/>
10/21/05	ID# CK#	Kay Herald 144 Kate Shelley Drive Boone IA 50036		100.00	<input type="checkbox"/>
SUB-TOTAL				\$900.00	
TOTAL (if last page of this schedule)				\$	

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Reset Form

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)
Elect Kriss Philips for Mayor Committee

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
10/21/05	ID# CK#	Dennis Kolbbaum 1443 Kate Shelley Drive Boone IA 50036		\$100.00	<input type="checkbox"/>
10/21/05	ID# CK#	Laura Mehlhaus 1459 Dakota PL Boone IA 50036		25.00	<input type="checkbox"/>
10/21/05	ID# CK#	Jack Blanshan 203 Cedar Street Boone IA 50036		100.00	<input type="checkbox"/>
10/21/05	ID# CK#	Jim Ballantyne 904 S Jackson Street Boone IA 50036		100.00	<input type="checkbox"/>
10/21/05	ID# CK#	Linda Ballantyne 904 S Jackson Street Boone IA 50036		100.00	<input type="checkbox"/>
10/24/05	ID# CK#	Robert Booth 630 S Marshall Street Boone IA 50036		150.00	<input type="checkbox"/>
10/24/05	ID# CK#	Susan Dyer 541 S Cedar Street Boone IA 50036		50.00	<input type="checkbox"/>
10/24/05	ID# CK#	Ron Rosenzweig 1656 210th Street Boone IA 50036		100.00	<input type="checkbox"/>
10/24/05	ID# CK#	Robert Fisher 1225 Parkway Drive Boone IA 50036		100.00	<input type="checkbox"/>
10/25/05	ID# CK#	Susan Gano 606 Edgewood Drive Boone IA 50036		50.00	<input type="checkbox"/>
SUB-TOTAL				\$875.00	
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)
Elect Kriss Phillips for Mayor Committee

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
10/25/05	ID# CK#	Nancy Edelman 1115 Story Street Boone IA 50036		\$ 50.00	<input type="checkbox"/>
10/26/05	ID# CK#	Ryan Mahoney 1135 Aldrich Avenue Boone IA 50036		100.00	<input type="checkbox"/>
10/26/05	ID# CK#	Mary Bilden 503 S Story Street Boone IA 50036		100.00	<input type="checkbox"/>
10/26/05	ID# CK#	Vern Condon 1632 13th Street Boone IA 50036		100.00	<input type="checkbox"/>
10/26/05	ID# CK#	Sandra Puntteney 1404 Aldrich Avenue Boone IA 50036		100.00	<input type="checkbox"/>
10/26/05	ID# CK#	Nate Landas 1216 Aldrich Avenue Boone IA 50036		100.00	<input type="checkbox"/>
10/31/05	ID# CK#	Wayne Rausa 628 S Boone Street Boone IA 50036		100.00	<input type="checkbox"/>
10/31/05	ID# CK#	George Eckstein PO Box 11 Boone IA 50036		50.00	<input type="checkbox"/>
10/31/05	ID# CK#	Paul Jacobson 203 S Montana Boone IA 50036		50.00	<input type="checkbox"/>
10/31/05	ID# CK#	Joe Casberg 1217 Country Club Drive Boone IA 50036		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 850.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<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)
Elect Miss Phillips for Mayor Committee

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
11/1/05	ID# CK#	David Grant 832 L Avenue Boone IA 50036		\$ 200.00	<input type="checkbox"/>
VARIOUS	ID# CK#	Miscellaneous contributors Under TP 25.00		341.90	<input type="checkbox"/>
11/1/05	ID# CK#	Lisa Kobrinusz 1409 Aldrich Avenue Boone IA 50036		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL \$ 591.90

TOTAL (if last page of this schedule) \$ 5616.90

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

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)
Elect Kriss Phillips for Mayor Committee

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
10/19/05	ID# CK# 0098	Boone Post Office Boone IA 50036	Certified mail to Iowa Ethics	\$4.42
10/19/05	ID# CK# 0099	KWBG Am Radio 724 Story Street Boone IA 50036	Radio Ads	328.50
10/23/05	ID# CK# 1001	Sunstrom Miller Press 807 Keeler Street Boone IA 50036	Campaign cards	134.39
10/23/05	ID# CK# 1002	Boone Shopping News P.O. Box 100 Boone IA 50036	Newspaper ads	1094.70
10/23/05	ID# CK# 1003	KWBG Am Radio 724 Story Street Boone IA 50036	Radio Ads	600.00
10/23/05	ID# CK# 1004	Enslay Photography 723 Story Street Boone IA 50036	Campaign pictures	60.00
10/23/05	ID# CK# 1005	Cutting Edge 1330 Marshall Street Boone IA 50036	Campaign Signs	597.00
10/27/05	ID# CK# 1006	The Chamber 903 Story Street Boone IA 50036	Labels for mailings	47.35
SUB-TOTAL				\$2866.42
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

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

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

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

Elect Kris Phillips for Mayor Committee

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
10/31/05	ID# CK# 1007	Boone Shopping News P.O. Box 103 Boone IA 50036	Newspaper Ads	\$ 625.00
10/31/05	ID# CK# 1008	Cutting Edge 1330 Marshall Street Boone IA 50036	Campaign Signs	633.48
11/2/05	ID# CK# 1009	George Eckstein P.O. Box 11 Boone IA 50036	Postage & Copies Labels Reimbursement	441.53
11/2/05	ID# CK# 1010	Vickie Pictz P.O. Box 446 Boone IA 50036	Labels	7.50
	ID# CK#			
SUB-TOTAL				\$ 1707.51
TOTAL (if last page of this schedule)				\$ 4573.93

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

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Elect Kriss Phillips Soc Mayor Committee

Reset 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
10/31/05	Dee McKnight 814 8th Street Bosc MA 02036		Flyers	\$ 100.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
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					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 100.00
 TOTAL (if last page of this schedule) \$ 100.00

*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.