

Reset Form

DISCLOSURE SUMMARY PAGE

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

RECEIVED
FAX
JAN 18 2007

Concerned Citizens for Better Education

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 _____ Political Party (if applicable) _____

Office Sought _____ District (if Senate or House) _____

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.

SIGNATURE OF PERSON FILING REPORT _____ TELEPHONE _____ DATE SIGNED _____

I AM FILING A January 19, 2007 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED _____

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

Local Committees, enter Date of Election _____
County & Local Committees, enter County in which Election is held Buchanan Co

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.)	\$ 316.46
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	4,131.00
Schedule F: Loans Received total (Attach Schedule F)	_____
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	_____
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL	\$ _____
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	3,524.22
Schedule F: Loan Repayments total (Attach Schedule F)	_____
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 923.24

**UNPAID BILLS (From Schedule D - Attach Schedule D) _____ \$ _____
 *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) _____ \$ _____
 **OUTSTANDING LOANS (From Schedule F - Attach Schedule F) _____ \$ _____
 CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES _____ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) _____ \$ _____

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

For Instructions, See Back of Form



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)

Concerned Citizens for Better Education

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/YY)	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
12-08-06	ID# CK#	Steve Wapthart 2121 Plymouth Ave Indep 50644		\$600 ⁰⁰	<input type="checkbox"/>
12-08	ID# CK#	Mary Corkery 2312 183 St Indep		300	<input type="checkbox"/>
12-08	ID# CK#	Roger Nov RR Rowley 52329		75 ⁰⁰	<input type="checkbox"/>
12-08	ID# CK#	Lenord Hunter 305 6th Ave Indep		100 ⁰⁰	<input type="checkbox"/>
12-08	ID# CK#	Ramon Rasseussen Rowley 52329		50 ⁰⁰	<input type="checkbox"/>
12-08	ID# CK#	RT Miller 3193 King Ave Rowley 52329		450 ⁰⁰	<input type="checkbox"/>
12-08	ID# CK#	Tom Greenley 1780 185th St Independence 50694		100 ⁰⁰	<input type="checkbox"/>
12-08-06	ID# CK#	Currency misc		140 ⁰⁰	<input type="checkbox"/>
12-15-06	ID# CK#	Craig Roberts 1625 330 St Brandon		50 ⁰⁰	<input type="checkbox"/>
12-15-06	ID# CK#	Dave Lynch 2275 Iowa Ave Indep 50644		150 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$2015	
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



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)

Concerned Citizens for Better Education

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.

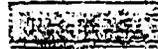
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
12-15	ID# CK#	B A Goldenstein 768 Noley Ave Indep 50644		\$100 ⁰⁰	<input type="checkbox"/>
12-15	ID# CK#	Robert Rasmussen 210 Rowley St Rowley 52329		100 ⁰⁰	<input type="checkbox"/>
12-15	ID# CK#	Mike Noe 2624 Coats Blvd Rowley 52329		100 ⁰⁰	<input type="checkbox"/>
12-15	ID# CK#	Lawrence Noe 2564 Postal Indep 50644		100 ⁰⁰	<input type="checkbox"/>
12-15	ID# CK#	Ron Gramling 1679 Indiana Ave Indep 50644		100	<input type="checkbox"/>
12-15	ID# CK#	Guy Grover 813 3rd Ave Indep 50644		1000 ⁰⁰	<input type="checkbox"/>
12-15-06	ID# CK#	Dave Jardenig 2457 Henley Ave Indep 50644		500 ⁰⁰	<input type="checkbox"/>
12-20-06	ID# CK#	MISC		116	<input type="checkbox"/>
12-18	ID# CK#	Margaret Zieser 3103 Michel Rowley 52329		100 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$7216	
TOTAL (if last page of this schedule)				\$4131	

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STATE OF ILLINOIS
COMMISSION ON CAMPAIGN FINANCE

11/17/01

FOR MAILED MAIL STATE BOARD FORM



SCHEDULE
E
(FBI 0703)

MONEY
EXPENDITURE

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES, ACTS, POLITICAL LINKS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES AND POLITICAL ACTIVITIES MUST BE IDENTIFIED IN THE DESIGNATED COLUMN AND THE FISCAL RESPONSIBILITY MUST BE IDENTIFIED. A LIST OF ID NUMBERS IS AVAILABLE FROM THE DATA DIVISION OF THE STATE BOARD OF ELECTIONS.

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (include same as on Statement of Organization)

Concerned Citizens for Better Education

DATE	DESCRIPTION OF EXPENDITURE	ADDRESS TO WHOM EXPENDITURE WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12-15		Paul Dorr PO Box 188 Ocheyedan 51254	consulting	\$ 950.00
12-8-07		"	"	850.00
12-15		Karans Print Rite 2515 Falls ave Waterloo Ia 50701	balance due	1624.22
1-18-07		Linda Walhart 2121 Plymouth Iadep 50644	reimburse credit card phone marketers	100.00
Sub-TOTAL				\$ 3524.22
TOTAL (if last page of this schedule)				\$ 3524.22

THIS FORM APPLIES TO CANDIDATE COMMITTEES ONLY.

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

Expenditures to persons or firms providing editorial, advertising, fundraising, polling, managing, organizing services must also be detail itemized on Schedule G by the date of the expenditure and the date of the type of expenditure made by the person or firm on behalf of the candidate's committee. (Refer to Schedule G instructions.)

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