

For Instructions, See Back of Form

Reset Form

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| SCHEDULE A (Rev. 12/13) | 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)
 Boes for Council

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.

| FOR 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 FUND-RAISER INCOME |
|------------------------------|--|--|--|-----------------|--------------------------|
| 8/12/15 | ID# CK# | Carol Gronstal 224 Lynn St Apt 3; Carroll IA | | \$100 | <input type="checkbox"/> |
| 8/13/15 | ID# CK# | Charlie Nixon 304 Gilbert St, Coon Rapids, IA | | \$25 | <input type="checkbox"/> |
| 8/13/15 | ID# CK# | Jim Pedelty 1528 Birch Street, Carroll IA | | \$100 | <input type="checkbox"/> |
| 8/13/15 | ID# CK# | Myron Johnson 2810 N Grant Rd, Carroll IA | | \$100 | <input type="checkbox"/> |
| 10/23/15 | ID# CK# | Susan VanDyke 1608 N Carroll St, Carroll IA | | \$100 | <input type="checkbox"/> |
| 10/23/15 | ID# CK# | CJ Niles 120 W Randall Rd, Carroll IA | | \$100 | <input type="checkbox"/> |
| 10/23/15 | ID# CK# | Nick Badding 304 W 17th St, Carroll IA | | \$50 | <input type="checkbox"/> |
| 10/23/15 | ID# CK# | Wayne Seaman 1827 NW Street, Carroll IA | | \$50 | <input type="checkbox"/> |
| 10/23/15 | ID# CK# | Mary Schneider 421 S Clark St, Carroll IA | | \$25 | <input type="checkbox"/> |
| 10/23/15 | ID# CK# | Jeff Boes Todd Terrace, Carroll IA | | \$25 | <input type="checkbox"/> |

SUB-TOTAL
 \$
 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 applicable* in the relationship column.

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| SCHEDULE A (Rev. 12/13) | MONETARY RECEIPTS |
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CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

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

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.

| FOR 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 FUND-RAISER INCOME |
|--|--|--|--|-----------------|--------------------------|
| 10/23/15 | ID# CK# | Steve Nuckels 1321 N Carroll St, Carroll IA | | \$50 | <input type="checkbox"/> |
| 10/23/15 | ID# CK# | Rick Boes 1520 Birch St, Carroll IA | Father-in-law | \$50 | <input type="checkbox"/> |
| 10/29/15 | ID# CK# | Carol Gronstal 224 Lynn St Apt #3, Carroll IA | | \$100 | <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 | | | | \$ 200.00 | |
| TOTAL (if last page of this schedule) | | | | \$ 875 | |

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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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.

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

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

| 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 |
|--|--|--|--------------------------------|-----------------|
| 10/3/15 | ID# CK#102 | J Design Services LLC 1615 N Adams St Carroll, IA 51401 | Graphic/Brochure | \$8.56 |
| 10/23/15 | ID# CK#103 | Herald Publishing Company 508 N Court St Carroll, IA 51401 | Newspaper Ad | 407.75 |
| 10/15/15 | ID# CK#101 | Options Ink 858 U.S. 30 Carroll, Iowa 51401 | Brochures | \$337.69 |
| 10/31/15 | ID# CK# | CBTV, INC P.O. Box 886 Carroll, IA 51401 | TV Ad | \$22.00 |
| 10/31/15 | ID# CK# | KCIM/KKRL 1119 Plaza DR Carroll, IA 51401 | Radio Ad | \$99.00 |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$875.00 |
| TOTAL (if last page of this schedule) | | | | \$875.00 |

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

Boes for Council

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|---|----------------------------------|
| SCHEDULE E (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 |
|--|--|---|-------------------------------------|-----------------------------|-----------------------------------|
| 9/24/15 | Misty Boes 1617 Birch Street Carroll, IA 51401 | | Yard Signs | \$345.00 | |
| 10/3/15 | Misty Boes 1617 Birch Street Carroll, IA 51401 | | Graphic/Brochure | \$71.44 | |
| 11/30/15 | Misty Boes 1617 Bitch Street Carroll, IA 51401 | | Daily Times Ad | \$407.75 | |
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| SUB-TOTAL | | | | \$824.19 | |
| TOTAL (if last page of this schedule) | | | | \$824.19 | |

*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.