

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

JAN -5 PM 3:27

COMMITTEE NAME (Must be same as on Statement of Organization)
Campaign To Elect Julie Alhese

IMPORTANT: Indicate by # type of committee you are reporting for: 6
(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: Julie Alhese Political Party (if applicable): _____
Office Sought: 2nd Ward City Council District (if Senate or House): _____

FORM DR-2 DISCLOSURE REPORT
(Rev. 12/2009)

For Office Use Only

Comm. # 14050
Logged In SW
Scanned SW
Computer _____
Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), 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.

Madonna Pinter 563-259-1059 1/4/12
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A Report for Election 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 8, 2011
County & Local Committees, enter County in which Election is held
Clinton

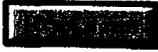
STATEMENT OF CASH ON HAND

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>143.64</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1305.13</u>
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	\$	<u>1448.77</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>1438.39</u>
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)	\$	<u>10.38</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>- 0 -</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>- 0 -</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

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

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)

Campaign to Elect Julie Altesee

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.

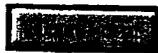
CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

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
10/24/11	ID# CK#	Michael Cassaday + Diane 3110 HARTS Mill Rd CLINTON IA 52732	N/A	\$ 100.00	<input type="checkbox"/>
10/28/11	ID# CK#	Richard O'Leary 1008 Briar Cliff Ln CLINTON IA 52732	N/A	50.00	<input type="checkbox"/>
10/28/11	ID# CK#	Rebecca Goebel 339 50 14th ST. CLINTON IA 52732	N/A	25.00	<input type="checkbox"/>
10/28/11	ID# CK#	David Vickers + Karen 583 Woodland Dr. CLINTON IA 52732	N/A	50.00	<input type="checkbox"/>
11-1-11	ID# CK#	Beth Griswold 336 4th Ave N. CLINTON IA 52732	N/A	150.00	<input type="checkbox"/>
11-1-11	ID# CK#	Eugene Griswold 1156 Bobetta Ct. CLINTON IA 52732-3405	N/A	150.00	<input type="checkbox"/>
11-4-11	ID# CK#	Charles Altesee 3415 Valley Oaks Dr CLINTON IA 52732	Husband	300.00	<input type="checkbox"/>
12-2-11	ID# CK#	Barb Jacobsen 1507 Honey Lane CLINTON IA 52732	N/A	100.00	<input type="checkbox"/>
11-2-11	ID# CK#	Mike Johnson 2101 Lincolnway CLINTON IA 52732	N/A	50.00	<input type="checkbox"/>
10/21/11	ID# CK#	James McGraw + Lynn 3 Heather Lane CLINTON IA 52732	N/A	50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1025.00	
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

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)

Campaign to elect Julie Allesen

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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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/YYR)	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
	ID# CK#	<i>INTEREST FROM Valley Bank 500 East Leclair ST</i>		\$	<input type="checkbox"/>
	ID# CK#	<i>Eldridge, Ia 52248 Clinton Ia BRANCH</i>		<i>- 10</i>	<input type="checkbox"/>
<i>12-30-11</i>	ID# CK#	<i>Julie Allesen 3415 Valley Oaks Dr Clinton Ia 52732</i>		<i>280.00</i>	<input type="checkbox"/>
<i>11-30-11</i>	ID# CK#	<i>Int. From Valley BK Clinton BRANCH</i>		<i>103</i>	<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

\$ *280.13*

TOTAL (if last page of this schedule)

\$ *1305.13*

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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)
Campaign to elect Julie Allsee

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
11-4-11	ID# 14050 CK#	Clinton Herald 221 6 th Ave So Clinton IA 52732	advertising	\$391.01
11-9-11	ID# 14050 CK#	Clinton Herald 221 6 th Ave So Clinton IA 52732	Thankyou ad	115.36
11-16-11	ID# 14050 CK#	Amanda Feddersen 311 4 th Ave Low Moor IA 52757	Pickup advertising SIGNS	115.00
12-2-11	ID# 14050 CK#	Clinton Printing 1402 Roosevelt St. Clinton IA 52733-0064	300 Election Handouts + Thankyou Letters	133.75
11-10-11	ID# 14050 CK#	Mark Misiewicz 3231 Tower Ct Clinton IA 52732	Advertising Design	150.00
12-30-11	ID# 14050 CK#	KMCN 1000 3175 Clinton IA 52732	Radio Advertising	280.00
10-27-11	ID# 14050 CK#	Clinton Printing 1402 Roosevelt Clinton IA 52732	Bus cards	155.15
10-28-11	ID# 14050 CK#	Clinton Printing 1402 Roosevelt Clinton IA 52732	postage for Letters	98.12
SUB-TOTAL				\$ 977.39
TOTAL (if last page of this schedule)				\$1438.39

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).)

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(for Schedule B)