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.

Reset Form

IA ETHICS AND CAMPAIGN DISCLOSURE BO

2012 OCT 12 AM 8:38

COMMITTEE NAME *(Must be same as on Statement of Organization)*
CECIL BLUM FOR SUPERVISOR

IMPORTANT: Indicate by # type of committee you are reporting for: ___
(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

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

For Office Use Only
Comm. # 18868
Logged In: ___
Scanned TA
Computer: ___
Audited: ___

CANDIDATE COMMITTEES ONLY:
Candidate Name: CECIL BLUM
Political Party (if applicable): REPUBLICAN
Office Sought: COUNTY SUPERVISOR
District (if Senate or House): ___

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.

C J Blum — SIGNATURE OF PERSON FILING REPORT
712-263-9800 — TELEPHONE
10-10-12 — DATE SIGNED

I AM FILING A OCTOBER 19, 2012 REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR
(report date) Indicate by # ___

☐ 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: ___

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.) $	-0-
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	-0-
Schedule F: Loans Received total (Attach Schedule F)	-0-
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	-0-
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL $	-0-
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	-0-
Schedule F: Loan Repayments total (Attach Schedule F)	-0-
CASH ON HAND at the end of this reporting period (if final report balance must be zero) $	-0-
**UNPAID BILLS (From Schedule D - Attach Schedule D) $	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) $	308.50
**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

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

Cecil Blum for Supervisor

Reset Form

SCHEDULE **E** (Rev. 06/97) — IN-KIND CONTRIBUTIONS

☐ 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
7/19/2012	Cecil Bum Box 219 Denison, IA 51442	self	Ad	$ 54.00	☐
7/20/2012	Cecil Bum Box 219 Denison, IA 51442	self	Ad	209.50	☐
8/1/2012	Cecil Bum Box 219 Denison, IA 51442	self	Ad	45.00	☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
			SUB-TOTAL	$	
			TOTAL (if last page of this schedule)	$ 308.50	

*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.