

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
JAN 19 2007

Reset Form

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 St. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

IMPORTANT: Indicate by # type of committee you are reporting for: 5
 (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: Clint Martin Political Party (if applicable): Democratic
 Office Sought: Board of Supervisors District (if Senate or House): _____

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.

Suzanne K. Hare SIGNATURE OF PERSON FILING REPORT
 (641) 446-7285 TELEPHONE
 01-19-07 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 October 19, 2006

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 07, 2006
 County & Local Committees, enter County in which Election is held
DECATUR

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>608.99</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		<u>323.00</u>
Schedule F: Loans Received total (Attach Schedule F)		_____
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		_____
<i>(Schedule H applies to Candidates' Committees Only)</i>		
SUB-TOTAL	\$	<u>391.99</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>292.17</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) (Attach DR-3)	\$	<u>99.82</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>541.57</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>290.70</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	_____
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO	
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0.00</u>
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 checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Martin for Supervisor

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 88B.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/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
6-21-06	ID# CK# 4387	Cannon's Lamoni, IA		\$ 25.00	
10-18-06	ID# CK# 1423	Leonard ~ Dody Boswell 28368 177th Ave Davis City, IA		106.00	
10-20-06	ID# CK# 1043	Sunshine Arney 12015 main Lean IA		14.00	
10-23-06	ID# CK# 3624	Kathy Martin 1202 E. Main St Lamoni, IA	Mother	45.00	
11-3-06	ID# CK# 3206	William Russell 121 S Ferguson Lamoni IA 50140		25.00	
11-03-06	ID# CK#			114.00	✓
	ID# CK#				

SUB-TOTAL

\$323.00

TOTAL (if last page of this schedule)

\$323.00

* 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

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" 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)
Martin for Supervisor

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
6-27-06	ID# CK#	American State Bank Lamoni IA	check order	\$ 17.95
7-11-06	ID# CK# 513	Pumps Plus Leon IA	GAS for Sunshine Arney	36.00
8-13-06	ID# CK# 520	Alco Discount Store 108 N. 3rd Leon IA	6 CANS of paint	12.78
8-15-06	ID# CK# 523	Alco Discount Store 108 N. 3rd Leon IA	Paint Supplies	4.02
10-18-06	ID# CK# 542	Pumps Plus Leon IA	Joe Morgan Jr for labor	20.00
10-19-06	ID# CK# 543	Dollar General 303 NE. IDAHO Leon IA	Supplies	6.42
10-19-06	ID# CK# 544	HV-VEE 720 E Main Lamoni IA	Copies + Stamps	9.08
10-19-06	ID# CK# 545	Genex 302 E Main Lamoni IA	GAS FOR TRUCK	15.00

SUB-TOTAL \$ 115.25

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).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" 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)
Martin for Supervisor

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
10-19-06	ID# CK# 546	Subway 124 S. Linden Lamoni, IA	meal	\$ 13.89
10-19-06	ID# CK# 547	Pompos Plus 210 E. 1st Leon IA	Drinks	1.54
10-20-06	ID# CK# 548	Varsity Drug 101 E main Lamoni IA	Copies	1.30
10-22-06	ID# CK# 549	Alco Discount Store 102 N. 3rd Leon IA	Ink, paper, Drink	5.49
10-23-06	ID# CK# 551	Casey's Leon IA	Gas for Sunshine Army	20.00
11-03-06	ID# CK# 552	Lamoni Community Ctr Lamoni IA	Campaign Rally	25.00
11-07-06	ID# CK# 554	Pompos Plus 210 E 1st Leon IA	meal	10.12
11-08-06	ID# CK# 555	Home to go 2091 E main Lamoni IA	meal	10.08
SUB-TOTAL				\$ 87.42
TOTAL (If last page of this schedule)				\$

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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 88A.402(3)(i).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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COMMITTEE NAME (Must be same as on Statement of Organization)
Martin for Supervisor

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
11-10-06	ID# CK# 556	Leon Journal Reporter P.O. Box 580 Leon IA	Ads	\$ 49.50
11-23-06	ID# CK# 557	Casper US Leon IA	miles for Clint	35.00
11-29-06	ID# CK# 558	Genex Lamoni IA	meal	5.00
	ID# CK#			
SUB-TOTAL				\$ 89.50
TOTAL (if last page of this schedule)				\$ 292.17

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

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

Martin for Supervisors

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

DATE RECEIVED (MM/DD/YYR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10-18-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	OO copies	\$ 3.00	
10-18-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	supplies	2.14	
10-18-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	supplies	6.40	
10-18-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	Posters	13.38	
10-23-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	Copies	3.30	
11-08-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	beverages	4.06	
11-07-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	Ads	47.10	
11-09-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	Ads	42.00	
12-15-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	Thank You Ads	12.00	
11-08-06	Clint Martin 1202 E. MAIN LAMONI, IA	Self	354 miles @ 44 1/2 cents	157.32	
SUB-TOTAL				\$ 290.70	
TOTAL (if last page of this schedule)				\$ 290.70	

*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.