

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)
 Committee To Re-Elect Edgar Allen Blow For Supervisor

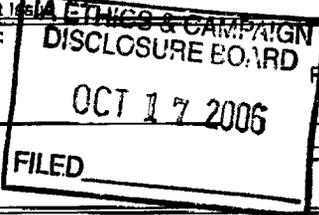
IMPORTANT: Indicate by # type of committee you are reporting for: 5
 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:
 Candidate Name: Edgar Allen Blow Political Party (if applicable): NBP
 Office Sought: County Supervisor District (if Senate or House): _____

FORM DR-2 DISCLOSURE REPORT
 (Rev. 12/2005)

For Office Use Only
 Comm. # _____
 Logged In _____
 Scanned _____
 Computer _____
 Audited _____

File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th, 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.

Dorothy J. Rowley
SIGNATURE OF PERSON FILING REPORT

319 754-4963
TELEPHONE

October 17, 2006
DATE SIGNED

I AM FILING A October 19, 2006 REPORT FOR (1) ELECTION //(2) NON-ELECTION YEAR.
(report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED July 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 7, 2006
 County & Local Committees, enter County in which Election is held
Des Moines

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>105.92</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		<u>2757.00</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>2862.92</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>1422.74</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>1440.18</u>
**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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Committee To Re-Elect Edgar Allen Blow 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.

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
09/05/2006	ID# CK#	Pierce W. Griffin 14293 Irish Ridge Rd Burlington, IA 52601		\$ 150.00	
09/05/2006	ID# CK#	Gloria Warner 1702 Emerald Drive West Burlington, IA 52655		100.00	
09/05/2006	ID# CK#	David C. Miller 313 Ramsey Street West Burlington, IA 52655		50.00	
09/13/2006	ID# CK#	Richard A. Lewis 11389 Oak Point Dr. West Burlington, IA 52655		50.00	
09/13/2006	ID# CK#	Richard Swarrington 2124 S. Main Burlington, IA 52601		50.00	
09/26/2006	ID# CK#	Alma Stottmeister 522 Ruthella West Burlington, IA 52655	mother-in-law	200.00	
10/04/2006	ID# CK#	John A. Hueschen 12931 158th Ave. West Burlington, IA 62755		25.00	X
10/04/2006	ID# CK#	Lynette D. Salisbury 523 Cameron Burlington, IA 52601		25.00	X
10/04/2006	ID# CK#	Fran Mapel PO Box 353 Burlington, IA 52601		25.00	X
10/04/2006	ID# CK#	Lee Inghram 208 E. Dewey St. Danville, IA 52623		100.00	X

SUB-TOTAL
\$ 775.00

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) (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.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Committee To Re-Elect Edgar Allen Blow For Supervisor

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CAUTION: Section 68B.32A(8), 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
10/04/2006	ID# CK#	Ann Inghram 208 E. Dewey St. Danville, IA 52623		\$ 100.00	X
10/04/2006	ID# CK#	Rosemary J. Carman 500 Conrad Ct. Burlington, IA 52601		200.00	X
10/04/2006	ID# CK#	Howard E. Taeger 11328 S. Prairie Grove Rd. West Burlington, IA 52601		50.00	X
10/04/2006	ID# CK#	Mildred Thomas 19731 HWY 79 Danville, IA 52623		50.00	X
10/04/2006	ID# CK#	Galen L. Shepherd 12036 Little Flint Rd. West Burlington, IA 52655		100.00	X
10/10/2005	ID# CK#	James W. Smith 12794 158th Ave West Burlington, IA 52655		100.00	X
10/04/2006	ID# CK#	cash - fund raiser		942.00	X
09/05/2006	ID# CK#	cash		40.00	
09/25/2006	ID# CK#	cash		220.00	
10/10/2006	ID# CK#	cash		140.00	
SUB-TOTAL				\$ 1942.00	
TOTAL (if last page of this schedule)				\$ 2717.00	

* 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) (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.

FOR INSTRUCTIONS, SEE BACK OF FORM



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.

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 Committee To Re-Elect Edgar Allen Blow 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
08/02/2006	ID# CK#	State of Iowa	Civil Penalty/failed to file by July 19, 2006	\$ 20.00
10/10/2006	ID# CK#	Craftsman Press 203 N. 3rd. St. Burlington, IA 52601	invoice 16351 500 Yard signs/job 10326	590.64
10/11/2006	ID# CK#	KCPS 208 Jefferson St. PO Box Burlington, IA 52601	946 Radio spots on KCPS	459.00
10/12/2006	ID# CK#	Riverview Designs 722 Jefferson Burlington, IA 52601	20 yard signs 18x24 2 " " 4'x8'	353.10
	ID# CK#			
SUB-TOTAL				\$ 1422.74
TOTAL (if last page of this schedule)				\$ 1422.74

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)(l).)