

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

Mark Knuth Campaign

IMPORTANT: Indicate by # type of committee you are reporting for: 7

( 1 ) Statewide/Legislative/Judge Standing or 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: Mark Knuth Political Party (if applicable): \_\_\_\_\_

Office Sought: W.D. School Board District (if Senate or House): \_\_\_\_\_

IA ETHICS  
DISCLOSURE  
SEP - 7 2006

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.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE 319-350-6378 Cell

DATE SIGNED 9-7-06

I AM FILING A 9-7-06 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
 (report date) Indicate by # A

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 <u>9-12-06</u>
County & Local Committees, enter County in which Election is held <u>Dubuque</u>

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>0</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		<u>1370</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>		
<b>SUB-TOTAL</b>	\$	<u>1370</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>1065.79</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>304.21</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>379.50</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	
CONSULTANT BREAKDOWN (Schedule G - Attached?)	YES <u>X</u> NO	
<b>CANDIDATE COMMITTEES ONLY:</b>		
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

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Mark Knuth Campaign

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
8-20-06	D# CK#	Job Supple 23938 Hwy 136 Cascade, IA 52033		\$ 50	<input type="checkbox"/>
8-25-06	ID# CK#	John McDermott 1020 Aitchison Rd Cascade, IA 52033		100	<input type="checkbox"/>
8-21-06	ID# CK#	Tim & Patti Gehl 21698 Fillmore Rd Cascade, IA 52033		150	<input type="checkbox"/>
8-23-06	ID# CK#	Bell Schueller 506 Tanoe Ct. Farley, IA 52046		100	<input type="checkbox"/>
8-23-06	ID# CK#	Mike & Carol McMullen 24052 Kearney Rd Cascade, IA 52033		50	<input type="checkbox"/>
8-26-06	ID# CK#	Pat & Sandy Howard 1101 Johnson St. S.W. Cascade, IA 52033		50	<input type="checkbox"/>
8-26-06	ID# CK#	ED & Darice Recker 713 3rd Ave S.E. Cascade, IA 52033		100	<input type="checkbox"/>
8-28-06	ID# CK#	Cecil Knuth 1503 Farley Rd Cascade, IA 52033		200	<input type="checkbox"/>
8-28-06	ID# CK#	Steve & Jan Supple 20834 Badger Rd Cascade, IA 52033		50	<input type="checkbox"/>
8-30-06	ID# CK#	Gerald Volk 23537 Hwy 136 Cascade, IA 52033		25	<input type="checkbox"/>
SUB-TOTAL				\$ 875	
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

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal fund.)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

**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
8-30-06	ID# CK#	Landy & Deb Manternach 7415 244th ST. Cascade, IA 52033		\$ 100	<input type="checkbox"/>
8-30-06	ID# CK#	Blair & Donna Gleason 200 4th Ave S.E. Cascade, IA 52033		30	<input type="checkbox"/>
8-30-06	ID# CK#	Allen & Sharon Manternach 7912 Eagle View Dr Cascade, IA 52033		50	<input type="checkbox"/>
8-30-06	ID# CK#	Pick & Susan Knepper 013 2nd Ave S.E. Cascade, IA 52033		50	<input type="checkbox"/>
8-30-06	ID# CK#	Tim & Amy McElmeel 5402 Ridgewood Dr. Cascade, IA 52033		40	<input type="checkbox"/>
8-30-06	ID# CK#	Randy & Lisa Ludwig 31375 Old Castle Rd Iyersville, IA 52040		25	<input type="checkbox"/>
8-30-06	ID# CK#	Greg & Lisa Vanderlugt 1106 5th Ave S.E. Cascade, IA 52033		50	<input type="checkbox"/>
8-30-06	ID# CK#	Paul & Suzanne Schramm 20097 Stonebrier Ln Iyersville, IA 52040		50	<input type="checkbox"/>
8-30-06	ID# CK#	Greg & Mona Manternach 11541 Hwy 136 N. Cascade, IA 52033		100	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$495	
<b>TOTAL (if last page of this schedule)</b>				\$1370	

\* 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

Reset Form

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE B</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)  
 Mark Knuth Campaign

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
8-28-06	ID# CK# 2	Cascade Pioneer 109 Adams St. S.E. PO #8 Cascade, IA 52033	Advertisement in local newspaper	\$ 108
8-28-06	ID# CK# 1	R.L. Dorley Advertising 1010 University Ave. P.O. 151 Duquaque, IA 52004-1151	Yard signs	433.84
8-30-06	ID# CK# 3	ED Recker 211 3rd Ave S.E. Cascade, IA 52033	Reimbursement for brochures manufactured by Heritage Printing Company	139.95
9-1-06	ID# CK# 4	Cascade Pioneer 109 Adams St. S.E. PO. #8 Cascade, IA 52033	Advertisement in local newspaper	384
	ID# CK#			
SUB-TOTAL				\$ 1065.79
TOTAL (if last page of this schedule)				\$ 1065.79

**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 6A.402(3)(j).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as in Statement of Organization)  
Mark Knuth Campaign

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
9-7-06	Dyersville Commercial 223 1 <sup>ST</sup> Ave E Dyersville, IA 52040	Advertisement in local News paper	\$ 379.50
SUB-TOTAL			\$ 379.50
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 379.50

\*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1  
(for Schedule D)

**CANDIDATE COMMITTEES NOTE:**  
 \*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.