FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM **DR-2** (Rev. 06/2002) — DISCLOSURE REPORT

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

IMPORTANT: Indicate type of committee you are reporting for: [7]

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates

For Office Use Only
Comm. # ____
Indexed ____
Audited ____
Computer ____

2010 OCT 19 PM 4:30

CANDIDATE COMMITTEES ONLY:

Candidate Name: Jody Lewis Anderson
Political Party: Democrat
Office Sought: Hardin County Supervisor
District (If Senate or House): —

Stacey A Anderson — SIGNATURE OF TREASURER (or person filing this report)
641-648-3932 — TELEPHONE
Oct 19th, 2010 — DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from $20 to $800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Campaign Disclosure (report date) REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR. Indicate one [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 Notice of Dissolution is filed.)

Local Committees, enter Date of Election: NOV 2, 2010
County & Local Committees, enter County in which Election is held: Hardin County

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies 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)	1904.20
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL $	1904.20
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	1066.54
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) $	837.66
**UNPAID BILLS (From Schedule D - Attach Schedule D) $	154.91
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) $	716.19
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) $	—

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ____ YES ____ NO

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Committee To Elect Jody Anderson 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 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
June 21-2010	ID# 9084 CK# 1351	Hardin County Democratic Central Committee, Treasurer Kurt Kelsey 14093 P. Ave Iowa Falls Ia 50126	My Party	$200.00	☐
July 3-2010	ID# CK# CASH	John P. Whitesell 519 College Ave, Iowa Falls, IA	Friend	$20.00	☐
8-18-10	ID# CK# 1708	Jody Anderson 827 Richmond Ave [redacted] Iowa Falls, Ia 50126	[redacted] my self	$375.00	☐
8-31-10	ID# CK# 1680	Andy & Cindy Goodner		100.00	☑
8-31-10	ID# CK# 31620	Kurtis R. Kelsey		100.00	☑
8-31-10	ID# CK# 8626	Craig & Kristi Harris		150.00	☑
8-28-10	ID# CK# 2071	Gloria Lawler Reber		100.00	☑
8-31-10	ID# CK# 9208	Robert & Arleen Fuller		30.00	☑
8-31-10	ID# CK# 7784	Annie or Kenneth Kuper		25.00	☑
8-31-10	ID# CK# 10249	Ardeth & George W. Vest J.R.		25	☑
			SUB-TOTAL	$1125.00	
			TOTAL *(If last page of this schedule)*	$[redacted]	

* 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. 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Committee to Elect Jody Anderson 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(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 FUN RAIS INCO
9-1-10	ID# CK# 4154	Mary Beth Lawler	Friend	$ 50.00	✓
8-31-10	ID# CK# 3442	James D. & Norene Johnson	Friend	25.00	✓
8-31-10	ID# CK# 2887	Sarah R. Day	Friend	25.00	✓
8-31-10	ID# CK# 1003	Kurtis Kelsey Treasurer Murra For Supervisor Payment For ½ Ad For Fund Raiser	Friend	67.25	
8-31-10	ID# CK#	Small CASH Donations Fund Raiser	Friend	280.00	✓
* Quit From TJarks 8-31-10	ID# CK# ½ OF CASH For Quilt	Ruth Anderson 219 So. Ave Iowa Falls Ia 50126	Mother	100.00	✓
9-17-10	ID# CK# 5306	Patricia A. Whitesell & John P. Whitesell P.O. Box 308, Iowa Falls Ia 50126	Friend	75.00	
9-20-10	ID# CK# CASH	Harry Anderson 2565 W. Ave Lancaster, CA 93536-5336	Uncle	100.00	
9-21-10	ID# CK# CASH	Betty Taylor 20054 Highway D15 Iowa Falls	Friend	20.00	
10-18-10	ID# CK# CASH	Wayne G. Zeigler 115 Slayton Ave Iowa Falls, Ia 50126	Friend	20.00	
			SUB-TOTAL	$ 762.25	
			TOTAL (If last page of this schedule)	$	

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For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 08/07) | MONETARY RECEIPTS

☐ AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect Jody Anderson 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(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 FUN RAIS INCO
9-14	ID# CK# 1006	Murra For Supervisor ½ of FundRaiser Kurtis Kelsey Treasurer	Fellow Democrate	$ 16.95	✓
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 16.95

TOTAL (If last page of this schedule) $ 1904.20

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FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING FORM	

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

...ATE 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)*
Committee to Elect Jody Anderson 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
8-18-10 8-18-10	ID# CK# 1001	Iowa Falls Library	FAX	$ 5.00
8-23-10 8-23-10	ID# CK# 1002	Times Citzen Paper Iowa Falls	Payment For Fund Raiser Ad	134.50
8-25-10 8-25-10	ID# CK# 1003	Sarah R. Day Iowa Falls	Payment For Post Cards For Fund Raiser	25.00
8-31-10 8-31-10	ID# CK# 1004	Hy Vee Food Store Iowa Falls Fund Raiser Supplies	Fund Raiser Supplies	52.00
8-31-10	ID# CK# 1005	Hy Vee Food Store Iowa Falls	Fund Raiser Supplies	21.55
9-9-10	ID# CK# 1006	Chase Visa CARD	Payment For ½ OF Yard Signs	300.00
9-30-10	ID# CK# 1007	Chase Visa CARD	Payment For ½ Yard Signs & Printing Set up For Door Hangers	338.00
10-15-10	ID# CK# 1008	Times Citzen News Paper	Ad For Supervisor	183.00
			SUB-TOTAL	$ 1059.05
			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.)

...penditures 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 68.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING FORM	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

...ATE 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)*
Committee to Elect Jody Anderson 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
10-03-10	ID# CK# NA	Service Charge Iowa Falls State Bank	Service Charge + TAX For Checking Acct	$ 7.49
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$ 7.49
			TOTAL *(If last page of this schedule)*	$ 1066.54

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.)

...penditures 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 56.6(3)(j).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Committee To Elect Jody Anderson Supervisor

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

Reset Form

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS

☐ CHECK THIS BOX IF AMENDING FORM

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

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.

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*
8- -10	Jody Anderson on Chase visa card 821 Richmond Ave Iowa Falls, Ia 50126	200 Yards Signs Paid	600.00
Above Bill Has Been Paid			
10-18	Lady Printing Charge on Visa	5000 Door Hangers	154.91
		SUB-TOTAL	$ 154.91
		TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD	$ 600.00

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

Page 1 of 1 (for Schedule D)

Total 154.91

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.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee To Elect Jody Anderson 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
5-28-10	Jody Anderson 821 Richmond Ave Iowa Falls, Ia 50126	My Self	Newspaper Ad	$ 183.00	☐
7-02-10	Jody Anderson 821 Richmond Ave Iowa Falls, Ia 50126	My Self	T Shirts For Parades	$ 157.93	☐
7-3-10	Jody Anderson 821 Richmond Ave Iowa Falls, Ia 50126	My Self	Candy For Parades	$ 21.36	☐
8-10-10	Jody Anderson 821 Richmond Ave Iowa Falls, Ia 50126	My Self	Boat Club Rental For Fund Raiser 8-31	$ 35.00	☐
8-16-10	Danny Anderson 2917 Redwood DR Carrollton TX 75007-4840	Brother	400 Pens	218.90	☐
8-31-10	Frankie Franks 110 E. Pine St Iowa Falls Ia 50126	Friend	1/3 OF Quilt	$ 100.00	☑
					☐
					☐
					☐
					☐

* SEE Schedule A

SUB-TOTAL $ 716.19

TOTAL (If last page of this schedule) $ 716.19 716.19

*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.

Page 1 of 1 (for Schedule E)