FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM **DR-2** (Rev. 07/2003) DISCLOSURE REPORT

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

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

Tim Smith For Harrison Co Sheriff

IMPORTANT: Indicate type of committee you are reporting for: ✓

(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

CANDIDATE COMMITTEES ONLY:

Candidate Name: Tim Smith

Political Party: Democrat

Office Sought: Sheriff

District (If Senate or House)

CAMPAIGN BOARD JAN 2 2007

Sandra L Bennett — SIGNATURE OF TREASURER (or person filing this report)

515-855-4454 — TELEPHONE

1-3-07 — DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 1-3-07 (report date) REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR. Indicate one ☐

☐ 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 ____

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. (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.) ..... $ 387.61

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A Cash Contributions total (Attach Schedule A) (*also see in-kind below) ..... 100.00 from Henrsey

Schedule F: Loans Received total (Attach Schedule F) ..... None

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... None

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL..... $ ____

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ..... ____

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) ..... $ 487.61

**UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $ None

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $ None

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $ None

CANDIDATE COMMITTEES ONLY:

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

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ 487.61

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)*
Tim Smith For Wardin Co. Sheriff

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
8/11/06	ID# CK#	Tim Smith 11608 Country 533 Iowa Falls, IA 50126	Self	$ 100.00	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐

SUB-TOTAL $ 100.00

TOTAL ***(If last page of this schedule)*** $ 100.00

* 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.

Page _____ of _____
(for Schedule A)