

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD

2009 NOV 25 PM 2:40

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

MCWILLIAMS FOR CITY COUNCIL AT LARGE COMMITTEE

IMPORTANT: Indicate by # type of committee you are reporting for: 6
(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 _____ Political Party (if applicable) _____

TERRY MCWILLIAMS _____

Office Sought _____ District (if Senate or House) _____

CITY COUNCIL AT LARGE _____

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Logged in _____	
Scanned _____	
Computer _____	
Audited _____	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

LENNIS MOORE
SIGNATURE OF PERSON FILING REPORT

319.931.3450
TELEPHONE

NOV 25 - 2009
DATE SIGNED

I AM FILING A Oct 29, thru Nov 25, 09 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 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 DR-3 is filed.)

Local Committees, enter Date of Election <u>DEC 1, 2009 Runoff</u>
County & Local Committees, enter County in which Election is held <u>HENRY</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>95¹⁹</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>945</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>-0-</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>-0-</u>
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	<u>1040¹⁹</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>1009⁸⁴</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>-0-</u>
CASH ON HAND at the end of this reporting period (If final report balance must be zero)	\$	<u>30³⁵</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>-0-</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>25</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>-0-</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES	<u>X</u> NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>-0-</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 type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
McWILLIAMS FOR CITY COUNCIL AT LARGE COMMITTEE

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
10/30/09	ID# CK#	Wesley + Geraldine Barton 600 Smith Adams Place Mt. Pleasant, Iowa 52641		\$ 50 ⁰⁰	<input type="checkbox"/>
10/30/09	ID# CK#	Alan + Malinda Hulsinger 1205 Liberty Lane Carlisle, Iowa 50047		100 ⁰⁰	<input type="checkbox"/>
11/04/09	ID# CK#	Lennis Moore 803 North Lincoln St. Mt. Pleasant, Iowa 52641		100 ⁰⁰	<input type="checkbox"/>
11/04/09	ID# CK#	Paula Joyce Dawson 2417 Lisa Lane Mt. Pleasant, Iowa 52641		100 ⁰⁰	<input type="checkbox"/>
11/04/09	ID# CK#	Greg + Paula Kinney 1626 Old Hwy 34 West Mt. Pleasant, Iowa 52641		100 ⁰⁰	<input type="checkbox"/>
11/05/09	ID# CK#	Kurt + Mary Nease 409 East Baker Street Mt. Pleasant, Iowa 52641		100 ⁰⁰	<input type="checkbox"/>
11/06/09	ID# CK#	Richard Gavelle 2257 - 235 th Street Mt. Pleasant, Iowa 52641		20 ⁰⁰	<input type="checkbox"/>
11/08/09	ID# CK#	Susan Smith 602 East Green Street Mt. Pleasant, Iowa 52641		100 ⁰⁰	<input type="checkbox"/>
11/09/09	ID# CK#	Dave + Karen Timmerman 2537 Iowa Ave Mt. Pleasant, Iowa 52641		25 ⁰⁰	<input type="checkbox"/>
11/10/09	ID# CK#	Dennis + Alica Fitzpatrick 401 East Washington Mt. Pleasant, Iowa 52641		100 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 795 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). 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. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
McWilliams For City Council At Large Committee

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
11/17/09	ID# CK#	Lee & Linda McWilliams 800 South Walnut St. Mt. Pleasant, Iowa 52641		\$ 50 ⁰⁰	<input type="checkbox"/>
11/20/09	ID# CK#	Thomas J. Vilsack 2229 Vanowen Plaza NW #1 Washington DC. 20008		100 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
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	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 150
\$ 945

TOTAL (If last page of this schedule)

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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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.

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

COMMITTEE NAME (Must be same as on Statement of Organization)
MC WILLIAMS FOR CITY COUNCIL AT LARGE COMMITTEE

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
10/29/09	ID# CK#	KLLS Radio 2411 Radio Dr. MT. Pleasant, Iowa 52641	10 Radio spots for campaign	\$ 150 ⁰⁰
11/12/09	ID# CK#	KLLS Radio 2411 Radio Dr. MT. Pleasant, Iowa 52641	54 Radio spots for runoff election	546 ⁰⁰
11/20/09	ID# CK#	MT. Pleasant News Paper 215 West Monroe St. MT. Pleasant, Iowa 52641	4 Campaign ads for runoff election	289 ⁴⁴
11/23/09	ID# CK#	MT. Pleasant News Paper 215 West Monroe St. MT. Pleasant, Iowa 52641	1 endorsement ad for campaign runoff election	80 ⁴⁰
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1,069 ⁸⁴

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).)

