

Reset Form

DISCLOSURE SUMMARY PAGE

Jasper

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

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

Tiedje 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 Rick Tiedje Political Party (if applicable) Democratic

Office Sought County Supervisor District (if Senate or House) _____

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.

Rick Tiedje 641-292-9470 7-19-2006
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 7-19-06 **ETHICS & CAMPAIGN DISCLOSURE REPORT FOR** (1) ELECTION (2) NON-ELECTION YEAR.
 (report date) Indicate by #

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 November 7 2006
 County & Local Committees, enter County in which Election is held Jasper

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>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		<u>1320.</u>
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	\$ <u>1320.</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....		<u>607.31</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>712.69</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>0</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$	<u>0</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)		___ YES <input checked="" type="checkbox"/> 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

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> 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)
Tiedje 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.

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/YY)	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
06-26-06	ID# CK#	Jespe County Democratic Central Committee 654 W. Dawson Ave Nevada Ia 50208		\$ 1000.	<input type="checkbox"/>
07-01-06	ID# CK#	Dannell Batterson 100 E 36th St N. Lakel Iowa 50141		150.	<input type="checkbox"/>
07-04-06	ID# CK#	Carol Krahen 1304 S. 4th Ave W. Nevada Iowa		50.	<input type="checkbox"/>
07-04-06	ID# CK#	Lois Hansch 2427 Hamilton Dr. Ames Iowa 50014	Mother in Law	50.	<input type="checkbox"/>
	ID# CK#	unitemized contributions		70	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1320	
TOTAL (if last page of this schedule)				\$ 1320	

* 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.

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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.

COMMITTEE NAME (Must be same as on Statement of Organization)
Tiedje 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
06-27-06	ID# elect bank CK# bank	1st Natl Natl Bank Box 489 Newton Ia 50208	check printing	\$ 2.40
06-27-06	ID# CK# 1001	Mercedes 2500 South Center St. Marshalltown Ia 50158	ply wood and paint for signs	42.12
06-28-06	ID# CK# 1002	Newton MFG. 1123 1st Ave E Newton Ia 50208	pencils	91.90
06-29-06	ID# CK# 1003	T's in Motion 112 E 4th St N. Newton Ia 50208	T shirts	323.00
06-30-06	ID# CK# 1004	Sign Pro 463 1st Ave E. Newton Ia 50208	signs	76.32
06-30-06	ID# CK# 1006	Mercedes 2500 South Center St. Marshalltown Ia 50158	2x4 for signs	26.40
06-30-06	ID# CK# 1005	Fairway Stores Inc. #467, 102 W. Anson St. Marshalltown Ia 50158	candy for parade	22.17
7-07-06	ID# CK# 1007	Fairway Stores Inc. #467, 102 W. Anson St. Marshalltown Ia 50158	candy for parade	22.50
SUB-TOTAL				\$ 607.31
TOTAL (if last page of this schedule)				\$ 607.31

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).)