

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

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)

Lyness for County Attorney

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
01/14/11	ID# CK#	Interest from Bank		\$00.06	<input type="checkbox"/>
02/07/11	ID# CK#	Interest from Bank		00.06	<input type="checkbox"/>
03/06/11	ID# CK#	Interest from Bank		00.05	<input type="checkbox"/>
04/07/11	ID# CK#	Interest from Bank		00.06	<input type="checkbox"/>
05/09/11	ID# CK#	Interest from Bank		00.05	<input type="checkbox"/>
06/07/11	ID# CK#	Interest from Bank		00.06	<input type="checkbox"/>
07/07/11	ID# CK#	Interest from Bank		00.06	<input type="checkbox"/>
08/07/11	ID# CK#	Interest from Bank		00.05	<input type="checkbox"/>
09/06/11	ID# CK#	Interest from Bank		00.06	<input type="checkbox"/>
10/09/11	ID# CK#	Interest from Bank		00.06	<input type="checkbox"/>
SUB-TOTAL				\$ 00.57	
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.

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Reset 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)
Lyness for County Attorney

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
11-11-2011	ID# CHK#	Interest from Bank		\$00.06	<input type="checkbox"/>
12-08-2011	ID# CHK#	Interest from Bank		00.06	<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
	ID# CHK#				<input type="checkbox"/>
SUB-TOTAL				\$ 00.12	
TOTAL (if last page of this schedule)				\$ 00.69	

* 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

React Form

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/08)	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)
Lyness for County Attorney

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
03/06/11	ID# CK# 1055	United States Post Office 400 South Clinton St. Iowa City, IA 52240-9998	Post Office Box Fee	\$ 28.00
09/11/11	ID# CK# 1056	United States Post Office 400 South Clinton St. Iowa City, IA 52240-9998	Post Office Box Fee	28.00
	ID# CK#			
SUB-TOTAL				\$ 56.00
TOTAL (if last page of this schedule)				\$ 56.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$600 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)(f).)

