

RECEIVED

JUL 17 2007

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



FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

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

Courthouse Restoration Committee

IMPORTANT: Indicate by # type of committee you are reporting for: 11  
( 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) \_\_\_\_\_  
Office Sought \_\_\_\_\_ District (if Senate or House) \_\_\_\_\_

FORM <b>DR-2</b> (Rev. 07/2007)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
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

[Signature]  
SIGNATURE OF PERSON FILING REPORT

515-462-4524  
TELEPHONE

7-17-07  
DATE SIGNED

I AM FILING A 7-19-07 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # 2

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>10-16-07</u>
County & Local Committees, enter County in which Election is held <u>Madison</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>0</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1675.00</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>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>14.35</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>1660.65</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 <u>X</u> NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 0

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form



<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)  
 Courthouse Restoration 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
	ID# CK#	See Schedule Attached.		\$	<input type="checkbox"/>
	ID# CK#	All receipts are donations to the committee.			<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1675	
TOTAL (if last page of this schedule)				\$ 1675	

\* 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.

**Courthouse Restoration Committee  
Cash Account Register  
For the Period From Jun 1, 2007 to Jun 30, 2007  
1020 - F&M Checking Account 15451**

Filter Criteria includes: Report order is by Transaction Date.

Date	Reference	Type	Payee/Paid By	Memo	Payment Am	Receipt Amt	Balance
6/1/07	445816	Receipt	Billeter, Kay			75.00	75.00
6/1/07	445817-261	Receipt	Walser, Robert & JoA			50.00	125.00
6/1/07	445818	Receipt	Hollingsworth, Brend			50.00	175.00
6/5/07	109030	Receipt	Montross Pharmacy			100.00	275.00
6/5/07	1861	Receipt	Mease Insurance			250.00	525.00
6/5/07	22352	Receipt	TS Ward DDS			100.00	625.00
6/5/07	2911	Receipt	Pearson, Mark & Eden			100.00	725.00
6/5/07	5899	Receipt	MHC&S			100.00	825.00
6/5/07	7144	Receipt	TEXLINE, INC			100.00	925.00
6/5/07	7323	Receipt	Sullivan, Patrick			25.00	950.00
6/5/07	7671	Receipt	Spera, John			100.00	1,050.00
6/5/07	9336	Receipt	Madison County Abstr			300.00	1,350.00
6/28/07	eft	Payment	F&M B		14.35		1,335.65
6/28/07	445810	Receipt	Scott, Doyle & Star			100.00	1,435.65
6/28/07	445811	Receipt	Raymond, Steve & Kat			50.00	1,485.65
6/28/07	445812	Receipt	Weeks, Robert & Shel			50.00	1,535.65
6/28/07	445813	Receipt	Acela, J.K.			50.00	1,585.65
6/28/07	445814	Receipt	Sullivan, Patrick			25.00	1,610.65
6/28/07	445815	Receipt	Bowers, Janice			50.00	1,660.65
		<b>Total</b>			<b>14.35</b>	<b>1,675.00</b>	

FOR INSTRUCTIONS, SEE BACK OF FORM



**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
**Courthouse Restoration 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
6/28/07	ID# CK#	Farmers & Merchants State Bank	Print Checks	\$ 14.35
	ID# CK#			
SUB-TOTAL				\$14.35
TOTAL (if last page of this schedule)				\$14.35

**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)(f).)