

Marshall

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM <b>DR-2</b> (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 <sup>th</sup> . Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

COMMITTEE NAME (Must be same as on Statement of Organization)  
**Pat Brooks for Supervisor**

IMPORTANT: Indicate by # type of committee you are reporting for:  
 ( 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

**IA ETHICS & CAMPAIGN  
DISCLOSURE BOARD**  
**JUL 19 2006**  
**PM 7:18:06**  
**FILED**

**CANDIDATE COMMITTEES ONLY:**

Candidate Name: **Patrick W. Brooks** Political Party (if applicable): **Democrat**

Office Sought: **Mashall County Board of Supervisors** 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.

*Patrick W. Brooks* **641-753-9134** **July 18, 2006**  
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED  
**Patrick W. Brooks**

I AM FILING A July 19, 2006, 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  
**11-07-2006**

County & Local Committees, enter County in which Election is held  
**Marshall**

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 <b>MUST</b> 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>757.66</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>1,386.00</u>
Schedule F: Loans Received total (Attach Schedule F) <b>-0- in this reporting period</b>	<u>0-</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	<u>-0-</u>
<b>(Schedule H applies to Candidates' Committees Only)</b>	
<b>SUB-TOTAL</b>	<b><u>2143.66</u></b>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	<u>1,458.09</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) (Attach DR-3)	\$ <u>685.57</u>
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$ <u>-0-</u>
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$ <u>-0-</u>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$ <u>600.00</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	___ YES <b>XX</b> NO
<b>CANDIDATE COMMITTEES ONLY:</b>	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ <u>none</u>
<b>STATE COMMITTEES:</b> Submit a reconciled campaign account bank statement in January of each year.	

For Instructions, See Back of Form

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SCHEDULE <b>A</b> (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)  
**Pat Brooks 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/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
5-16-06	ID# CK#	1404 S. 12th St Marshalltown, Iowa 50158 Paul and Vera Peglow		\$100.00	<input checked="" type="checkbox"/>
5-16-06	ID# CK#	John Swain N. 3rd St. Marshalltown, Ia 50158		100.00	<input checked="" type="checkbox"/>
5-16-06	ID# CK#	Charyl Finders 202 E. Southridge Rd Marshalltown, Ia 50158		25.00	<input checked="" type="checkbox"/>
5-17-06	ID# CK#	Mary A. Stewart 2 N. 19th St. Marshalltown, Ia 50158		25.00	<input checked="" type="checkbox"/>
5-19-06	ID# CK#	Mac & Jane Carter 2119 Three Bridges Road Marshalltown, Ia 50158		63.00	<input checked="" type="checkbox"/>
5-18-06	ID# CK#	Susan Malloy 3304 Merritt Rd Marshalltown, Ia 50158		75.00	<input checked="" type="checkbox"/>
5-18-06	ID# CK#	Sanford Schlesinger 307 Orchard Dr., Mtwn 50158		50.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	James & Katherine Sinning 1708 Brookside Rd Marshalltown, Ia 50158		126.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	T.R. Thompson 1406 S. 12th St. Marshalltown, Ia 50158		50.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	Terry Gray 703 Jerome St, Marshalltown, Iowa 50158		25.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 639.00

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.

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SCHEDULE <b>A</b> (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)

Pat Brooks 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.

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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
5-22-06	ID# CK#	John Wells 7 N. 4th St. Marshalltown, Iowa 50158		\$ 25.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	Jim & Daryl Kelehan 605 Jerome St. Marshalltown, Ia 50158		25.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	Burt & Carole Permar 106 College View Lane Marshalltown, Ia 50158		50.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	Dennis & Liz Johnson 408 N. 5th St. Marshalltown, Ia 50158		100.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	Dennis Walker 2306 S. 6th St. Marshalltown, Ia 50158		63.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	Rich Brown 617 Jerome St. Marshalltown, Ia 50158		63.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	David & Gladys Winter 1114 W. Main Marshalltown, Ia 50158		100.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	Bob & Carol Winkleblack 608 Forest Blvd Marshalltown, Ia 50158		63.00	<input checked="" type="checkbox"/>
5-22-06	ID# CK#	Mark & Karen Smith 816 Roberts Terrace Marshalltown, Ia 50158		63.00	<input checked="" type="checkbox"/>
5-24-06	ID# CK#	Edwin W. Bartine II 106 N. Center St. Marshalltown, Ia 50158		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 602.00	
TOTAL (if last page of this schedule)				\$	

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**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)*  
 Pat Brooks for Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE <i>(Disbursement)</i> WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5-15-06	ID# CK#	Wal Mart Marshalltown	food & supplies for fundraiser	\$ 47.60
5-17-06	ID# CK#	Those Ink Guys Marshalltown	campaign cards	152.15
5-20-06	ID# CK#	Fareway Grocery Marshalltown	food for fundraiser	21.94
5-21-06	ID# CK#	Mary Curley Marshalltown	guest book for fundraiser	10.65
5-23-06	ID# CK#	Carter Printing Marshalltown	yard signs	901.00
5-23-06	ID# CK#	Minuteman	copy service	2.41
5-23-06	ID# CK#	Centre Shoppes Marshalltown	thank you cards	8.45
5-29-06	ID# CK#	US Postmaster	stamps	168.00
SUB-TOTAL				\$ 1,312.20
<b>TOTAL (if last page of this schedule)</b>				\$

**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).)

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**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)  
Pat Brooks 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
6-20-06	ID# CK#	Mtwn Times-Republican Marshalltown	thank you ad	\$ 123.30
7-09-06	ID# CK#	Don Wilder for Supervisor Marshalltown	gas for parade	10.00
May & June 2006	ID# CK#	Wells Fargo Bank Marshalltown, Ia 50158	Monthly service charges total	12.59
	ID# CK#			

SUB-TOTAL \$ 145.89

**TOTAL (if last page of this schedule)** \$ 1,458.09

**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).)

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SCHEDULE <b>F</b> (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
**Pat Brooks for Supervisor**

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.  
TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 600.00

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**  
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL (PART I) \$ NONE

TOTAL CASH REPAYMENTS (PART II) \$ -0-  
From Schedule E -- TOTAL LOANS FORGIVEN \$ -0-  
TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 600.00

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