

Reset Form

DISCLOSURE SUMMARY PAGE

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

COMMITTEE NAME (Must be same as on Statement of Organization) JAHNEL 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) School Board or Other Political Subdivision PAC (10) Local Ballot Issue CANDIDATE COMMITTEES ONLY: Candidate Name: CHERYL JAHNEL Office Sought: MITCHELL COUNTY SUPERVISOR Political Party (if applicable): REPUBLICAN District (if Senate or House):

IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD FILED JAN 9 2007 PM 1:07

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.

Betty Borchardt SIGNATURE OF PERSON FILING REPORT 641-985-2104 TELEPHONE 9/107/2007 DATE SIGNED

I AM FILING A January 19 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 November 7, 2006 County & Local Committees, enter County in which Election is held Mitchell

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$129.00), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 200.27, Schedule F: Loans Received total, Schedule H: Total Sales of Campaign Property), SUB-TOTAL (\$329.27), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: Expenditures total, Schedule F: Loan Repayments total), CASH ON HAND at the end of this reporting period (\$0.00).

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) \*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

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

For Instructions, See Back of Form

Reset Form

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)  
JAHNEL 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
10/24/06	ID# CK# 7563	John H. Hartogh 3480 Windfall Ave. Elma, IA 50628		\$ 100.00	<input type="checkbox"/>
11/01/06	ID# CK# 1109	Republican Central Committee Mitchell County, IA		100.00	<input type="checkbox"/>
01/03/07	ID# CK# cash	Betty Borchardt PO Box 303 Riceville, Ia 50466		.27	<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				\$	
<b>TOTAL (if last page of this schedule)</b>				\$ 200.27	

\* 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

Reset 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)  
 JAHNEL 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
12/26/06	ID# CK# 518	Cheryl Jahnel 3404 Shadow Ave. Osage, IA 50461	Postage, fence posts, Misc.	\$ 36.82
12/31/06	ID# CK#	First State Bank 109 Woodland Ave., PO Box F Riceville, IA 50466	Service Charge/Sales Tas	.27
	ID# CK#			
SUB-TOTAL				\$ 37.09
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 329.27</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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**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 JAHNEL 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
10/29/06	ID# CK# 512	Mitchell County Press News 112 N 6th St. Osage, IA 50466	Advertizements	\$ 60.00
10/30/06	ID# CK# 513	Stacyville Monitor Review 117 S Broad St. Stacyville, IA 50476	Advertizements	28.00
10/31/06	ID# CK#	First State Bank 109 Woodland Ave., PO Box F Riceville, IA 50466	Service Charge/Sales Tax	1.07
11/06/06	ID# CK# 514	US Postal Service 209 W Main St. Riceville, IA 50466	100 stamps	39.00
11/10/06	ID# CK# 515	Mitchell County Press 112 N 6th St. Osage, IA 50466	Thank you Ad	75.00
11/10/06	ID# CK# 516	Riceville Recorder 111 E 2nd St. Riceville	Thank You Ad & printing of flyers	52.50
11/30/06	ID# CK#	First State Bank 109 Woodland Ave., PO Box F Riceville, IA 50466	Service Charge/Sales Tas	1.61
11/11/06	ID# CK# 517	Stacyville Monitor Review 117 S Broad St. Osage, IA 50466	Thank You Ad	35.00
SUB-TOTAL				\$ 292.18
<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).)