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

Reset Form

IA ETHICS AND CAMPAIGN DISCLOSURE
PM 10-15-08
2008 OCT 16 AM 10:44

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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

Committee to Re-elect Mike Beary 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: Michael R Beary
Political Party (if applicable): Republican
Office Sought: Monroe County Supervisor
District (if Senate or House):

FORM **DR-2** (Rev. 07/2007) — DISCLOSURE REPORT

For Office Use Only
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

Michael R Beary — **SIGNATURE OF PERSON FILING REPORT**
641-946-7976 — **TELEPHONE**
10-16-8 — **DATE SIGNED**

I AM FILING A October 19, 2008 (report date) REPORT FOR (1) **ELECTION** /(2)**NON-ELECTION** YEAR. 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: NOV 4 - 2008
County & Local Committees, enter County in which Election is held: Monroe

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.) ..... $ 0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) ..... ~~635.47~~ 0
Schedule F: Loans Received total (Attach Schedule F) 0
Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... $

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ..... ~~635.47~~ 0
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) ..... $ 0

****UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... $ —
***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... $ 635.47
****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

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

Committee to Re-elect Mike Beary Supervisor

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
9-19-8	Michael R Beary 5499 120th St Louisa, Iowa 50150	Same N/A	Reflective Tape for Signs	$ 71.96	☐
9-19-8	"	"	Paint Campaign Signs	28.88	☐
9-20-8	"	"	Paint Campaign Signs	9.08	☐
9-22-8	"	"	Reflective Tape for Signs	67.88	☐
9-24-8	"	"	"	246.10	☐
10-1-8	"	"	"	57.78	☐
10-3-8	"	"	"	57.78	☐
10-15-8	"	"	Radio Ads	96.00	☐
					☐
					☐

SUB-TOTAL	$
TOTAL (if last page of this schedule)	$ 635.47

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of _____ (for Schedule E)