

**DISCLOSURE SUMMARY PAGE**

**Reset Form**

<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

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

*Citizens for Common Sense Solutions*

**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

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**CANDIDATE COMMITTEES ONLY:**

Candidate Name \_\_\_\_\_ Political Party (if applicable) \_\_\_\_\_

Office Sought \_\_\_\_\_ District (if Senate or House) \_\_\_\_\_

NOV 10 2005  
HD

Late reports are subject to possible civil and criminal penalties.

*[Signature]* \_\_\_\_\_ TELEPHONE 515-226-0291 DATE SIGNED 11/8/05

SIGNATURE OF PERSON FILING REPORT

I AM FILING A November 3, 2005 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 8, 2005  
 County & Local Committees, enter County in which Election is held \_\_\_\_\_

**STATEMENT OF CASH ON HAND**

<b>CASH ON HAND</b> 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>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>\$25,100.00</u>
Schedule F: Loans Received total (Attach Schedule F) .....		<u>—</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....		<u>—</u>
<b>(Schedule H applies to Candidates' Committees Only)</b>		
<b>SUB-TOTAL</b> .....	\$	<u>25,100.00</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) .....		<u>21,378.23</u>
Schedule F: Loan Repayments total (Attach Schedule F) .....		<u>—</u>
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3) .....	\$	<u>3721.77</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>1,079.24</u>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F) .....	\$	<u>0</u>
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
<b>CANDIDATE COMMITTEES ONLY:</b>		
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$	<u>0</u>

**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)  
*Citizens for Common-Sense Solutions*

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
9/24/05	ID# CK#	ERIC E. WOOLSON 1001 OFFICE PARK ROAD, STE. 119 WEST DES MOINES, IA 50265		\$ 100	<input type="checkbox"/>
10/5/05	ID# CK#	Iowa Telecom 115 S 2nd Ave. West Newton, IA 50208		25,000	<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"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$25,100	
<b>TOTAL (if last page of this schedule)</b>				\$ 25,100	

\* 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**

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY EXPENDITURES</b>
<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)  
*Citizenstar Commonsense Solutions*

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
10/11/05	ID# CK# 101	Nevada Journal PO Box 904 Ames IA 50016	Newspaper Advertising	\$ 204.00
10/11/05	ID# CK# 102	Sidney Argus Herald PO Box 190 Sidney IA 51652	Newspaper Advertising	109.20
10/11/05	ID# CK# 103	Tabor Beacon Enterprise PO Box 299 Tabor, IA 51653	Newspaper Advertising	108.00
10/13/05	ID# CK# 1001	Clarinda Herald - Journal PO Box 287 Clarinda, IA 51632	Newspaper Advertising	175.28
10/13/05	ID# CK# 1002	United States Post Master 430 5th St West Des Moines, IA 50265	Stamps	37.00
10/13/05	ID# CK# 1003	Screen Imaged 22 g+b st. Des Moines, IA 50309	300 Signs	1,188.00
10/13/05	ID# CK# 1004	Riggs Printing and Forms 117 First Ave. E Newton IA 50209	2500 Know the Facts Letters	344.50
10/13/05	ID# CK# 1005	Manchester Press PO Box C Manchester, IA 52057	Newspaper Advertising	273.90
SUB-TOTAL				\$ 2,439.88
TOTAL (if last page of this schedule)				\$

**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).)

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)  
*Citizens for Common Sense Solutions*

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
10/13/05	ID# CK# 1006	Net Image Group 1001 Office Park Rd. Ste 121 West Des Moines, IA 50265	1 Hour Sign Work	\$ 75.00
10/13/05	ID# CK# 1007	601 Oberreuter 2209 Jefferson Rd. Manchester, IA 52057	Manchester Cheerleaders Lit Drop	500.00
10/14/05	ID# CK# 1008	KCZQ Radio 120 S. 35th St. Ste 2 Cresco, IA 52136	Cresco Radio Spots	550.00
10/14/05	ID# CK# 1010	The Concept Works 1001 Office Park Rd. Ste 119 West Des Moines, IA 50265	Consulting Fees	6,895.00
10/17/05	ID# CK# 1011	The Nevada Journal PO Box 904 Amos, IA 50010	Newspaper Advertising	204.00
10/17/05	ID# CK# 1012	The Fremont-Mills Beacon-Enterprise PO Box 299 Tabor, IA 51653	Newspaper Advertising	108.00
10/17/05	ID# CK# 1014	Office Depot 3910 University Ave Ste 10 West Des Moines, IA 50266	Paper, Envelopes, Printer Ink	41.31
10/17/05	ID# CK# 1015	The Dunlap Reporter 114 Iowa Ave. Dunlap, IA 51529	Newspaper Advertising	120.80
SUB-TOTAL				\$ 8494.11
<b>TOTAL (if last page of this schedule)</b>				\$

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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)  
*Citizens for Common Sense Solutions*

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
10/17/05	ID# CK# 1016	The Dunlap Reporter 114 Iowa Ave Dunlap, IA 51529	Newspaper Advertising	\$ 133.08
10/17/05	ID# CK# 1017	Vickie Gruba Immanuel Luther League 305 2nd Ave. W Cresco, IA 52136	Cresco Lit. Drop	500.00
10/17/05	ID# CK# 1018	The Sidney Argus Herald PO Box 190 Sidney, IA 51652	Newspaper Advertising	118.50
10/18/05	ID# CK# 1019	U.S. Post Master 430 5th St. West Des Moines, IA 50265	Stamps for Absentee Mailing	125.80
10/18/05	ID# CK# 1020	Fed Ex Kinko's 10201 University Ave Clive, IA 50325	Copying for Absentee Mailing	32.90
10/18/05	ID# CK# 1021	KMcH PO Box 497 Manchester, IA 52057	Manchester Radio Spots	331.25
10/19/05	ID# CK# 1022	Chaz Allen 101 W. 4th St. S. Newton, IA 50208	Driving Fees Reimbursement	100.00
10/19/05	ID# CK# 1023	Screen Images 22 9th St. Des Moines, IA 50309	100 Additional Yard Signs	425.06
SUB-TOTAL				\$ 1766.59
TOTAL (if last page of this schedule)				\$

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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)  
*Citizens for Common Sense Solutions*

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
10/21/05	ID# CK# 1024	The Clarinda Herald-Journal PO Box 287 Clarinda, IA 51632	Newspaper Advertising	\$ 184.50
10/21/05	ID# CK# 1025	The Manchester Press PO Box C Manchester, IA 52057	Newspaper Advertising	224.10
10/21/05	ID# CK# 1026	The Dunlap Reporter 114 Iowa Ave Dunlap, IA 51529	Newspaper Advertising	136.50
10/21/05	ID# CK# 1027	Groundswell Direct PO Box 218 Albert City, IA 50510	Polling (Benchmark)	5,540.72
10/24/05	ID# CK# 1028	The Fremont-Mills Beacon-Enterprise PO Box 299 Tabor, IA 51653	Newspaper Advertising	108.00
10/24/05	ID# CK# 1029	The Nevada Journal PO Box 904 Amos, IA 50010	Newspaper Advertising	204.00
10/24/05	ID# CK# 1030	Cresco Times Plain Dealer PO Box 350 Cresco, IA 52136	Newspaper Advertising	230.33
10/25/05	ID# CK# 1031	KMCH Radio PO Box 497 Manchester, IA 52057	Radio Spots -- Manchester	265.00
SUB-TOTAL				\$ 6,893.15
TOTAL (if last page of this schedule)				\$

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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)

*Citizens for Common Sense Solutions*

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
10/25/05	ID# CK# 1032	KCZQ Radio 120 S. 35th St. Ste 2 Cresco, IA 52136	Cresco Radio Spots	\$ 550.00
10/25/05	ID# CK# 1033	The Sidney Argus Herald PO Box 190 Sidney, IA 51652	Newspaper Advertising	118.50
10/27/05	ID# CK# 1034	KCZQ Radio 120 S. 35th St. Ste 2 Cresco, IA 52136	Cresco Radio Spots	530.00
10/28/05	ID# CK# 1035	The Clarinda Herald-Journal PO Box 287 Clarinda, IA 51632	Newspaper Advertising	270.60
10/28/05	ID# CK# 1036	The Manchester Press PO Box C Manchester, IA 52057	Newspaper Advertising	315.40
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,784.50
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 21,378.23</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).)

<b>SCHEDULE</b> <b>E</b> (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

*Citizens for Common Sense Solutions*

Reset 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
10/19/05	Iowa Telecom 115 S. 2nd Ave West Newton, IA 50208	NA	1 Month of local phone lines 7 lines	\$ 369.24	<input type="checkbox"/>
10/14/05 - 10/29/05	Iowa Telecom 115 S. 2nd Ave W. Newton, IA 50208	NA	Setting up yard signs \$15/hr 30 hours	450.00	<input type="checkbox"/>
10/7/05	Iowa Telecom 115 S. 2nd Ave W. Newton, IA 50208	NA	Yard Sign Design Costs 2.3 hrs	50.00	<input type="checkbox"/>
10/13	Iowa Telecom 115 S. 2nd Ave W Newton, IA 50208	NA	1st Brochure Design/ Layout 10.5 hrs	210.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL	\$ 1079.24
TOTAL (if last page of this schedule)	\$ 1,079.24

\*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.

Reset Form

SCHEDULE <b>G</b> (Rev. 02/96)	BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

*Citizens for Common Sense Solutions*

**PART I - NAME AND ADDRESS OF CONSULTANT**

Name of Consultant <i>The Concept Works</i>		
Mailing Address  <i>1001 Office Park Rd. Ste 119</i>		
City <i>West Des Moines</i>	State <i>IA</i>	Zip Code <i>50265</i>

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From <i>8-1-05</i> To <i>9-29-05</i>	\$ <i>6,875.00</i>

**ESTIMATES OF PERFORMANCE**

*Provide Strategic advice and creative services; coordinate and execute public and media relations activities, grassroots organization and development of campaign materials.*

**PART II - ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT** (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
			\$

SUB-TOTAL	\$
TOTAL (If last page of this schedule)	\$