IA ETHICS & CAMPAIGN DISCLOSURE BOARD

OCT 18 2006

FILED

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT

For Office Use Only
Control #
Logged In
Scanned
Computer
Audited

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

Kass For County Supervisor

IMPORTANT: Indicate by # type of committee you are reporting for: [ ]
(1)State/Judicial/Legislative/Judge Running 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: Don Kass

Political Party (if applicable): Republican

Office Sought: Plymouth County Supervisor

District (if Senate or House): 3

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 complete reports.

Don Kass — SIGNATURE OF PERSON FILING REPORT

712 786 2191 — TELEPHONE

10/15/06 — DATE SIGNED

I AM FILING A October 19th (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

County & Local Committees, enter County in which election is held: Plymouth

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of this reporting period. (Total of all funds held by the committee. This amount must be the same as the ending balance of the last reporting period or must be zero if this is first report filed.) ..... $ 259.56

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (Make sure it ties below) 1050.00

Schedule E: Loans Received total (Attach Schedule E) ..... —

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... —

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... $ 1309.56

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (Make sure dates and totals balance) 322.13

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) (Attach DR-3) ..... $ 987.43

**UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $ 729.56

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $

For Instructions, See Back of Form

[redacted]

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ 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)*
Kass For County 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.

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
7/26/06	ID# CK#	Dean Mohning 45525 C38 Remsen, IA 51050	None	$ 50.00	
7/26/06	ID# CK#	Gary Larson 11885 Pioneer Ave. Remsen, IA 51050	none	25.00	
7/26/06	ID# CK#	Don Meyer 5290 C Ave. Marcus, IA 51035	none	250.00	
1/27/06	ID# CK#	Ron Wieck 4362 Old Lakeport Rd Sioux City, IA, 51106	none	100.00	
7/31/06	ID# CK#	Craig Tharp 37374 310th St. Kingsley, IA 51028	none	250.00	
8/31/06	ID# CK#	Reinhold Hoffman 1902 Jackson St. Sioux City, IA 51104	none	100.00	
9/11/06	ID# CK#	William Schroeder 39356 260th St. Kingsley, IA 51028	none	75.00	
10/10/06	ID# CK#	Ralph Klemme 167 Edward Dr. SE Le Mars, IA 51031	none	50.00	
10/12/06	ID# CK#	Doug Becker 30473 C 70 Hinton, IA 51024	none	100.00	
10/12/06	ID# CK#	Craig Anderson Merrill, IA 51038	none	50.00	
			SUB-TOTAL	$	
			TOTAL *(if last page of this schedule)*	$1050.00	

*Disclosure is required if the contributor is the candidate, the candidate's spouse, or any relative making a contribution to the contributor. 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 relationship, enter "not applicable" in the relationship column.

Page _____ of _____ (for Schedule A)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

B

D

STATE PAC COMMITTEES NOW

COMMITTEE NAME

Kass For County 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
8/1/06	ID# CK#	Donahue 11205 Helber Road Logan OH 43138	Campaign Materials (pencils)	$146.95
8/27/06	ID# CK#	Reds Printing 410 5th Ave SW LaMars, IA 51031	Printed Materials	175 18
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL $

TOTAL (*if last page of this schedule*) $322.13

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY.

Purchases of certain campaign property costing $500 or more must also be itemized on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund raising, polling, mailing, 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).)

Page ____ of ____

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Kass For County Supervisor

[redacted]

SCHEDULE E (Rev. 09/07) — 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 FUNDRAISER CONTRIBUTION
9/25/06	Don Kass 48138 140th Rensen IA 51050	Self	Printed Materials	$ 255.97	☐
10/5/06	Don Kass 48138 140th Renssen IA 51050	Self	Printed Materials	87.59	☐
10/4/06	Don Kass 48138 140th Renssen IA 51050	Self	Radio Ads	153.00	☐
10/9/06	Don Kass 48138 140th Renssen, IA 51050	Self	Radio Ads	153.00	☐
10/11/06	Same as above	Self	Newspaper Ad	80.00	☐
					☐
					☐
					☐
					☐
					☐
			SUB-TOTAL	$	
			TOTAL (If last page of this schedule)	$ 729.56	

*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)