

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



FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Committee to Elect Charlene Butz

IMPORTANT: Indicate by # type of committee you are reporting for: 6  
( 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: Charlene Butz Political Party (if applicable): \_\_\_\_\_  
Office Sought: Windsor Heights City Council District (if Senate or House): \_\_\_\_\_

<b>FORM DR-2</b> (Rev. 07/2007)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # _____	_____
Logged In _____	_____
Spended _____	_____
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

Charlene Butz 274-4780 1/22/08  
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 1-19-2008 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by #  1

CHECK IF AMENDMENT TO REPORT DATED 11/9/07

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 _____
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**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.) .....	\$ 0.00
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) .....	625.00
Schedule F: Loans Received total (Attach Schedule F) .....	500.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....	_____
(Schedule H applies to Candidates' Committees Only)	
<b>SUB-TOTAL .....</b>	<b>\$ 1,125.00</b>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....	839.08
Schedule F: Loan Repayments total (Attach Schedule F).....	285.92
CASH ON HAND at the end of this reporting period (if final report balance must be zero) .....	\$ 0.00
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$ _____
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....	\$ 214.08
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$ _____
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO
<b>CANDIDATE COMMITTEES ONLY:</b>	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ _____
<b>STATE COMMITTEES:</b> Submit a reconciled campaign account bank statement in January of each year.	

For Instructions, See Back of Form



<b>SCHEDULE A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
	<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)  
Committee to Elect Charlene Butz

**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/YY)	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
9/30/07	ID# CK# 1911	Betty Glover 6803 Del Matro Windsor Heights, IA 50311		\$100.00	<input type="checkbox"/>
10/18/07	ID# CK# 5134	Flora Schmitt 280 South 79th Unit 1304 West Des Moines, IA 50266		100.00	<input type="checkbox"/>
10/18/07	ID# 6207 CK# 1009	Home Builders Assn. of Greater Des Moines 6751 Corporate Drive Johnston, IA 50131		100.00	<input type="checkbox"/>
11/3/07	ID# CK# 8945	Sandra O'Brien 6826 Del Matro Windsor Heights, IA 50311	sister	125.00	<input type="checkbox"/>
11/3/07	ID# CK# 12725	Richard L. or Mary Ruth Fitch 3819 Deer Run Ames, IA 50014		100.00	<input type="checkbox"/>
11/5/07	ID# CK# 2971	O. Eugene Johnson 6804 Del Matro Windsor Heights, IA 50311		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 625.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 625.00	

\* 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)  
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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
10/26/07	ID# CK# 1001	Principal Financial Group 711 High Street Des Moines, IA 50309	Copies of flyers	\$ 132.50
11/5/07	ID# CK# 1002	Impact 312 Sixth Ave Des Moines, IA 50309	Yard signs	574.08
11/2/07	ID# CK#	Principal Financial Group 711 High Street Des Moines, IA 50309	Copies of flyers	132.50
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 839.08</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 839.08</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)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)  
 Committee to Elect Charlene Butz

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ \_\_\_\_\_

**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.)

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT OF LOAN
10/26/07	Charlene Butz 7114 Washington Ave Windsor Heights, LA 50311	self	\$ 500.00
TOTAL (PART I)			\$ 500.00

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YY)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT REPAYED
1/23/08	Charlene Butz 7114 Washington Ave Windsor Heights, LA 50311	self	\$ 285.92
TOTAL CASH REPAYMENTS (PART II)			\$ 285.92
From Schedule E - TOTAL LOANS FORGIVEN			\$ 214.08
TOTAL OUTSTANDING LOANS END OF REPORT PERIOD			\$ 0.00

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 when it applies.



SCHEDULE F (Rev. 07/03) LOANS RECEIVED & REPAYED

CHECK THIS BOX IF AMENDING FORM

FOR INSTRUCTIONS, SEE BACK OF FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 Committee to Elect Charlene Butz



<b>SCHEDULE E</b> (Rev. 06/97)	IN-KIND CONTRIBUTIONS
	<input type="checkbox"/> 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
10/26/07	Charlene Butz 7114 Washington Ave Windsor Heights, IA 50311	self	cash	\$ 214.08	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 214.08	
<b>TOTAL (if last page of this schedule)</b>				\$ 214.08	

\*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.