

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

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

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

Clabaugh for Council

**IMPORTANT:** Indicate by # type of committee you are reporting for:  (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 Berd Clabaugh Political Party (if applicable) \_\_\_\_\_

Office Sought Johnston City Council District (if Senate or House) \_\_\_\_\_

NOV 3 2005  
AD

Late reports are subject to possible civil and criminal penalties.



(515) 252-1935

11-02-05

SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 10/30/05 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                          | <u>11-8-05</u> |
| County & Local Committees, enter County in which Election is held | <u>Polk</u>    |

## 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>710.00</u>                          |
| <b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>  |     |  |
| Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) .....   |     | <u>1275.00</u>                         |
| Schedule F: Loans Received total (Attach Schedule F) .....   |     | <u>0</u>                               |
| Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....   |     | <u>0</u>                               |
| <u>(Schedule H applies to Candidates' Committees Only)</u>   |     |  |
| SUB-TOTAL .....  | \$  | <u>1985.00</u>                         |
| <b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>  |     |  |
| Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) .....  |     | <u>317.30</u>                          |
| Schedule F: Loan Repayments total (Attach Schedule F) .....  |     | <u>0</u>                               |
| <b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3) .....   | \$  | <u>1667.70</u>                         |
| <b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D) .....  | \$  | <u>3330.35</u>                         |
| <b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....  | \$  | <u>-</u>                               |
| <b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F) .....   | \$  | <u>-</u>                               |
| <b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)   | YES | <input checked="" 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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

|   |                      |
|---|----------------------|
| SCHEDULE<br><b>A</b><br>(Rev. 07/03)                        | MONETARY<br>RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF<br>AMENDING FORM |                      |

**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 |
|--|--|--|--|-----------------|-----------------------------|
| 10/02/05                                     | ID#<br>CK#   | Anita Calkins<br>13002 Oak Brook Drive<br>Urbandale, IA. 50325 |  | \$25.00         | <input type="checkbox"/>    |
| 10/02/05                                     | ID#<br>CK#   | Betty Martindale<br>280 - 57th Ct<br>West Des Moines, IA. 5065 |  | \$50.00         | <input type="checkbox"/>    |
| 10/02/05                                     | ID#<br>CK#   | Jim Sherry<br>9424 Ironwood Lane<br>Johnston, IA. 5031         |  | \$5.00          | <input type="checkbox"/>    |
| 10/03/05                                     | ID#<br>CK#   | Kim Taylor<br>6031 Redbud Court<br>Johnston, IA. 50131         |  | \$25.00         | <input type="checkbox"/>    |
| 10/03/05                                     | ID#<br>CK#   | Alice Robertson<br>6798-Ceres Cr.<br>Johnston, IA. 50131       |  | \$20.00         | <input type="checkbox"/>    |
| 10/03/05                                     | ID#<br>CK#   | Jim Pender<br>7018 Colby Ave<br>Des Moines, IA. 50311          |  | 25.00           | <input type="checkbox"/>    |
| 10/03/05                                     | ID#<br>CK#   | Ken Prideaux<br>6796 NW 54th Ct<br>Johnston, IA. 50131         |  | \$25.00         | <input type="checkbox"/>    |
| 10/03/05                                     | ID#<br>CK#   | Dean Miller<br>6689 Ceres Cir.<br>Johnston, IA. 50131          |  | 25.00           | <input type="checkbox"/>    |
| 10/03/05                                     | ID#<br>CK#   | Phil Dunshee<br>9424 Elm Lane<br>Johnston, IA. 50131           |  | \$150.00        | <input type="checkbox"/>    |
| 10/03/05                                     | ID#<br>CK#   | David Roederer<br>8151 Wellington<br>Johnston IA. 50131        |  | \$50.00         | <input type="checkbox"/>    |
| <b>SUB-TOTAL</b>                             |  |  |  | \$ 400.00       |                             |
| <b>TOTAL (if last page of this schedule)</b> |  |  |  | \$              |                             |

\* 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

|   |                      |
|---|----------------------|
| SCHEDULE<br><b>A</b><br>(Rev. 07/03)                        | MONETARY<br>RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF<br>AMENDING FORM |                      |

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

**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 |
|--------------------------|--|--|--|-----------------|-----------------------------|
| 10/03/05                 | ID#<br>CK#   | Paula Dierenfeld<br>8151 Wellington<br>Johnston IA. 50131        |  | \$50.00         | <input type="checkbox"/>    |
| 10/04/05                 | ID#<br>CK#   | Dwight Swanson<br>13731 Hickman Rd. #3201<br>Urbandale IA. 50323 |  | \$100.00        | <input type="checkbox"/>    |
| 10/04/05                 | ID#<br>CK#   | Susan Lanwith<br>4555 41st<br>Des Moines IA 50310                |  | \$100.00        | <input type="checkbox"/>    |
| 10/04/05                 | ID#<br>CK#   | Ruth Stevens<br>3101 NW 13th<br>Ankeny, IA. 50021                |  | \$15.00         | <input type="checkbox"/>    |
| 10/05/05                 | ID#<br>CK#   | Kathy Houser<br>8000 Huntingwood Dr<br>Johnston, IA. 50131       |  | \$25.00         | <input type="checkbox"/>    |
| 10/05/05                 | ID#<br>CK#   | Jan Grogan<br>918 - 43rd<br>West Des Moines, IA 50265            |  | \$10.00         | <input type="checkbox"/>    |
| 10/05/05                 | ID#<br>CK#   | Sue McDowell<br>6012 Century Way E.<br>Johnston IA. 50131        |  | \$50.00         | <input type="checkbox"/>    |
| 10/06/05                 | ID#<br>CK#   | Diane Thompson<br>6023 Redbud Ct<br>Johnston IA 50131            |  | \$100.00        | <input type="checkbox"/>    |
| 10/06/05                 | ID#<br>CK#   | Steve Churchill<br>6140 Nottingham<br>Johnston IA. 50131         |  | \$100.00        | <input type="checkbox"/>    |
| 10/07/05                 | ID#<br>CK#   | Duane Gibson<br>3930 - Grand Ave. #309<br>Des Moines IA 50312    |  | \$50.00         | <input type="checkbox"/>    |

SUB-TOTAL

|           |
|-----------|
| \$ 600.00 |
| \$        |

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

\* 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.

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Reset Form

|   |                      |
|---|----------------------|
| SCHEDULE<br><b>A</b><br>(Rev. 07/03)                        | MONETARY<br>RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF<br>AMENDING FORM |                      |

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

**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 |
|--|--|--|--|-------------------|-----------------------------|
| 10/09/05                                     | ID#<br>CK#   | Mary Kaye Smith<br>5921 Aspen Cr.<br>Johnston IA. 50131    |  | \$25.00           | <input type="checkbox"/>    |
| 10/12/05                                     | ID#<br>CK#   | Teresa Bartschat<br>4301 - 101 st<br>Urbandale IA. 5022    |  | 50.00             | <input type="checkbox"/>    |
| 10/16/05                                     | ID#<br>CK#   | Walt Tomenga<br>7250 Hyperion Point<br>Johnston, IA. 50131 |  | 100.00            | <input type="checkbox"/>    |
| 10/16/05                                     | ID#<br>CK#   | Dave White<br>6020 Weybridge<br>Johnston. IA 50131         |  | 100.00            | <input type="checkbox"/>    |
|  | ID#<br>CK#   |  |  |                   | <input type="checkbox"/>    |
|  | ID#<br>CK#   |  |  |                   | <input type="checkbox"/>    |
|  | ID#<br>CK#   |  |  |                   | <input type="checkbox"/>    |
|  | ID#<br>CK#   |  |  |                   | <input type="checkbox"/>    |
|  | ID#<br>CK#   |  |  |                   | <input type="checkbox"/>    |
|  | ID#<br>CK#   |  |  |                   | <input type="checkbox"/>    |
|  | ID#<br>CK#   |  |  |                   | <input type="checkbox"/>    |
| SUB-TOTAL                                    |  |  |  | \$ 275.00         |                             |
| <b>TOTAL (if last page of this schedule)</b> |  |  |  | <b>\$ 1275.00</b> |                             |

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FOR INSTRUCTIONS, SEE BACK OF FORM

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

|   |                          |
|---|--------------------------|
| SCHEDULE<br><b>B</b><br>(Rev. 07/03)                        | MONETARY<br>EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF<br>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)  
Clabaugh for Council

| 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 |
|--------------------------|--|--|--------------------------------|-----------------|
| 10/06/05                 | ID#<br>CK#   | Factory Card Outlet - 4349 Merle Hay<br>Des Moines, IA 50310 | Parade Supplys                 | \$ 18.30        |
| 10/06/05                 | ID#<br>CK#   | Quiktrip - 5169 Merle Hay Rd. Des<br>Moines IA 50310         | Gas for Parade Car             | 11.00           |
| 10/2/05                  | ID#<br>CK# 2001  | Bull's Eye News<br>PO Box 392<br>Polk City, IA 50226         | Display Ad                     | 288.00          |
|                          | ID#<br>CK#   |  |                                |                 |

SUB-TOTAL \$ ~~288.00~~ 317.30

**TOTAL (if last page of this schedule)** \$ ~~288.00~~ 317.30

**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).)

|  |                          |
|--|--------------------------|
| SCHEDULE<br><b>D</b><br>(Rev. 08/98)                           | INCURRED<br>INDEBTEDNESS |
| <input type="checkbox"/> CHECK THIS BOX<br>IF AMENDING<br>FORM |                          |

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

**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**Reset Form**

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

| DATE INCURRED (MM/DD/YR)   | NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED | DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED | BALANCE OWED AT CLOSE OF REPORTING PERIOD* |
|--|---|--|--|
| 10/4/05  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Printing   | \$ 60.95                                   |
| 10/05/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Ad, Register   | \$ 240.00                                  |
| 10/05/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Cards, Parade Candy                                    | 36.00                                      |
| 10/6/05  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Parade Candy   | 11.89                                      |
| 10/6/05  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Parade Handouts  | 72.08                                      |
| 10/7/05  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Postage  | 115.00                                     |
| 10/7/05  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Lunch w/ supporter                                     | 24.52                                      |
| SUB-TOTAL  |   |  | \$ 560.44                                  |
| <b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b> |   |  | \$   |

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

560.44

|  |                          |
|--|--------------------------|
| SCHEDULE<br><b>D</b><br>(Rev. 08/98)                           | INCURRED<br>INDEBTEDNESS |
| <input type="checkbox"/> CHECK THIS BOX<br>IF AMENDING<br>FORM |                          |

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

**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**Reset Form**

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

| DATE INCURRED (MM/DD/YR)   | NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED | DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED | BALANCE OWED AT CLOSE OF REPORTING PERIOD* |
|--|---|--|--|
| 10/10/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Return candy   | \$ -25.41                                  |
| 10/20/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Voter Reg List   | 27.00                                      |
| 10/21/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Flyers   | 171.72                                     |
| 10/21/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Cards  | 10.59                                      |
| 10/21/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Postage  | 33.67                                      |
| 10/26/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Lunch w/ supporter                                     | 11.00                                      |
| 10/28/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Postage  | 23.00                                      |
| SUB-TOTAL  |   |  | \$ 251.57                                  |
| <b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b> |   |  | \$   |

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**  
\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

|  |                          |
|--|--------------------------|
| SCHEDULE<br><b>D</b><br>(Rev. 08/98)                           | INCURRED<br>INDEBTEDNESS |
| <input type="checkbox"/> CHECK THIS BOX<br>IF AMENDING<br>FORM |                          |

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

**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**Reset Form**

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

| DATE INCURRED (MM/DD/YR)   | NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED | DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED | BALANCE OWED AT CLOSE OF REPORTING PERIOD* |
|--|---|--|--|
| 10/29/05   | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       | Postage  | \$ 345.00                                  |
|  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       |  | —  |
|  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       |  | —  |
|  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       |  | —  |
|  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       |  | —  |
|  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       |  | —  |
|  | Gerd Clabaugh<br>6027 Redbud Ct.<br>Johnston, IA. 50131       |  | —  |
| SUB-TOTAL  |   |  | \$ 345.00                                  |
| <b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b> |   |  | \$   |

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**  
\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

