FOR INSTRUCTIONS SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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

For Office Use Only
Comm. # 13691
Logged In
Scanned
Computer
Audited

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

Joe Henry for City Council

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: Joe Henry

Political Party (if applicable):

Office Sought: City Council

District (If Senate or House):

RECEIVED FAX DEC - 7 2006

File with:
Iowa Ethics and Campaign Disclosure Board
510 E. 12th, Ste 1A
Des Moines, Iowa 50319
Fax: 515-281-3701

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 accurate reports.

SIGNATURE OF PERSON FILING REPORT

515-282-0547
TELEPHONE

12/7/06
DATE SIGNED

I AM FILING A 12/7/06 (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

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)	5342.31
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 $	5342.31
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	6255.67
Schedule F: Loan Repayments total (Attach Schedule F)	0
CASH ON HAND at the end of this reporting period (If final report balance must be zero) (Attach DR-3) $	-913.36
**UNPAID BILLS (From Schedule D - Attach Schedule D) $	1392.22
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) $	682.30
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) $	0
CONSULTANT BREAKDOWN (Schedule G Attached?)	___ YES ✓ NO
CANDIDATE COMMITTEES ONLY:	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $	0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

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)*

Joe Henry for City 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
9/7/06	ID# CK#	Julie Evans 3200 Park Ave Des Moines, IA 50321		$ 150.00	☐
9/9/06	ID# CK#	Joe Henry 2463 SE Highview Des Moines, IA 50320		23.00	☐
9/8/06	ID# CK#	Joe Henry 2463 SE Highview Des Moines, IA 50320		369.31	☐
9/20/06	ID# CK#	Harold and Marguerite McNabb 1232 Wisconsin Ave Ames, IA 50014		25.00	☐
9/20/06	ID# CK#	David Drake 1221 Center St, STE 3 Des Moines, IA 50309		100.00	☐
9/20/06	ID# CK#	Joe Lakers 3567 Grand Ave Unit 14 Des Moines, IA 50312		50.00	☐
9/20/06	ID# CK#	Jeffrey Weiss 3318 Aurora Des Moines, IA 50310		25.00	☐
9/22/06	ID# CK#	Tom Lynner 2931 Druid Hill Dr. Des Moines, IA 50315		300.00	☐
9/22/06	ID# CK#	Stacey Cargill 9272 Kingman Dr. West Des Moines, IA 50266		25.00	☐
9/26/06	ID# CK#	Tom Coates 1515 E. 17th St Norwalk, IA 50211		50.00	☐

SUB-TOTAL $ 1,117.31

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.

DEC-08-2006 12:25 PM P.03

For Instructions, See Back of Form

Reset Form

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)*

Joe Henry for City 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
9/27/06	ID# CK#	Linda Westergaard 4009 E. 23rd Des Moines, IA 50317		$ 100.00	☐
9/27/06	ID# CK#	Mary Brubaker 612 44th St. Des Moines, IA 50312		50.00	☐
9/28/06	ID# CK#	Lavon Griffeon 1165 NE 6th St Ankeny, IA 50021		25.00	☐
9/28/06	ID# CK#	Terry Loy 1217 Fulton St Indianola, IA 50125		25.00	☐
9/28/06	ID# CK#	Marilyn Spina 2545 E. 8th Ave Des Moines, IA 50317		30.00	☐
9/28/06	ID# CK#	Chris Green 3901 SW 56th St Des Moines, IA 50321		50.00	☐
9/28/06	ID# CK#	Neal Westergaard 4009 E 23rd St. Des Moines, IA 50317		100.00	☐
9/28/06	ID# CK#	Rose Vasquez 118 Water St #425 Des Moines, IA 50309		25.00	☐
9/28/06	ID# CK#	Carol Crandall 5424 SW 16th St Des Moines, IA 50316		30.00	☐
9/25/06	ID# CK#	Isabella Martarello 3620 SW 9th St Des Moines, IA 50315		25.00	☐

SUB-TOTAL $ 460.00

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.

DEC-08-2006 12:26 PM P.04

For Instructions, See Back of Form

Reset Form

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)

Joe Henry for City 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	X IF FOR FUND-RAISER INCOME
9/29/06	ID# CK#	Chet Gunn 1041 8th St Des Moines, IA 50314		$ 50.00	
9/29/06	ID# CK#	Bob Mahaffey 2220 E 32nd St. Des Moines, IA 50317		50.00	
9/29/06	ID# CK#	Ila Plasencia 962 40th St. West Des Moines, IA 50265		25.00	
10/3/06	ID# CK#	Frank Gallardo 2340 Staton Ave Des Moines, IA 50321		50.00	
10/3/06	ID# CK#	Stephen Roberts 666 Walnut St Ste 2300 Des Moines, IA 50309		25.00	
10/3/06	ID# CK#	Ed Fallon 1321 8th St. Des Moines, IA 50314		25.00	
10/6/06	ID# CK#	Mike Huston 510 43rd St. Des Moines, IA 50312		250.00	
10/8/06	ID# CK#	Joe Mandonica 2383 S 13th St. West Des Moines, IA 50265		200.00	
10/8/06	ID# CK#	Andrea Rivera-Harrison 3660 Park Ave Des Moines, IA 50321		100.00	
10/8/06	ID# CK#	Kathryn Dellacca 1124 67th St. Des Moines, IA 50311		15.00	
			SUB-TOTAL	$ 790.00	
			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.

DEC-08-2006 12:26 PM P.05

For Instructions, See Back of Form

Reset Form

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)*

Joe Henry for City 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(8), 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
10/9/06	ID# CK#	Katherine Caracciolo 1822 SW Porter Des Moines, IA 50315		$ 25.00	
10/9/06	ID# CK#	Linda Godwin 3012 Woolcott Ave Des Moines, IA 50321		100.00	
10/15/06	ID# CK#	J Mahrieg 1522 29th Des Moines, IA 50311		20.00	
10/16/06	ID# CK#	Clyde Fry 204 Rose Ave Des Moines, IA 50315		25.00	
10/17/06	ID# CK#	Bob Brammer 1717 Mar Ella Trail Des Moines, IA 50310		20.00	
10/19/06	ID# CK#	Melissa Watson Carl Wiederaenders 4212 Kingman Blvd Des Moines, IA 50310		50.00	
10/19/06	ID# CK#	John Tapscott 7364 Jesup Indianola, IA 50125		25.00	
10/26/06	ID# CK#	Mike McNatty 107 S Fourth Montezuma, IA 50171		50.00	
10/31/06	ID# CK#	Burt & Pat McClintock 669 41st Des Moines, IA 50312		25.00	
11/3/06	ID# CK#	Gayle Collins 100 Market St #418 Des Moines, IA 50309		50.00	

SUB-TOTAL $ 390.00

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.

DEC-08-2006 12:26 PM P.06

For Instructions, See Back of Form

Reset Form

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)*

Joe Henry for City 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	F FOR FUND-RAISER INCOME
11/3/06	ID# CK#	Bill Douglas 1406 Mondamin Ave Des Moines, IA 50314		$ 25.00	
11/3/06	ID# CK#	Todd Rettenmeier 4121 SE 14th St Des Moines, IA 50320		100.00	
11/6/06	ID# CK#	Jackie Norris 2805 38th St. Des Moines, IA 50310		25.00	
11/16/06	ID# CK#	Joe Henry 2463 E. Highview Dr Des Moines, IA 50320		50.00	
11/17/06	ID# CK#	Joe Coppola 1004 56th St. Des Moines, IA 50311		100.00	
11/17/06	ID# CK#	Joe Henry 2463 E Highview Dr Des Moines, IA 50320		500.00	
11/17/06	ID# CK#	Joe Henry 2463 E. Highview Dr Des Moines, IA 50320		500.00	
11/18/06	ID# CK#	Peggy Huppert 9759 Sunset Terrace Clive, IA 50325		25.00	
11/18/06	ID# CK#	Jean Mauss 2750 Cottage Grove Des Moines, IA 50311		250.00	
11/19/06	ID# CK#	Charles and Ellen Day 5325 Nw Bur Oak Dr Johnston, IA 50131		25.00	

SUB-TOTAL $ 1600.00

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.

DEC-08-2006 12:27 PM P.07

For Instructions, See Back of Form

Reset Form

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)*

Joe Henry for City 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
11/21/06	ID# CK#	Matt Tapscott 5901 Snyder Ave Des Moines, IA 50322		$ 35.00	
11/23/06	ID# CK#	Jack Hatch 696 18th St Des Moines, IA 50314		150.00	
11/23/06	ID# CK#	Pete Rose 1668 48th St. Des Moines, IA 50312		50.00	
11/27/06	ID# CK#	Tim Brandt Catherine Brandt 1604 S 42nd St West Des Moines, IA 50265		200.00	
11/28/06	ID# CK#	Diane Crane 301 SE Delaware Unit 203 Ankeny, IA 50021	Cousin	50.00	
11/29/06	ID# CK#	Max Cardenas 4014 School St Des Moines, IA 50311		50.00	
11/29/06	ID# CK#	Angela Tessau 134 61st St. West Des Moines, IA 50266		250.00	
11/29/06	ID# CK#	John Kline 2171 Grand Ave West Des Moines, IA 50265		100.00	
11/29/06	ID# CK#	Randal Walters PO Box 71094 Clive, IA 50325		100.00	
	ID# CK#				

SUB-TOTAL $ 985.00

TOTAL *(If last page of this schedule)* $ 5342.31

* 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.

DEC-08-2006 12:27 PM P.08

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)*

Joe Henry for City 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
9/8/06	ID# CK#	Iowa State Bank 6410 SW 9th St. Des Moines, IA 5035	Checking Account Charge	$ 20.50
9/12/06	ID# CK# T1	Mitch Henry 1900 M L Des Moines, IA 50314	Campaign Work	310.00
9/21/06	ID# CK# 1001	Carter Printing 1739 E. Grand Ave Des Moines, IA 50316	Business Envelopes, Return Envelopes and Letterhead	195.04
9/22/06	ID# CK# 1002	Mitch Henry 1900 M L King Des Moines, IA 50314	Campaign Work	200.00
9/28/06	ID# CK# 1031	Mitch Henry 1900 M L King Des Moines, IA 50314	Reimburse for Campaign Event Food & Beverages	101.68
9/28/06	ID# CK# 1004	Mitch Henry 1900 M L King Des Moines, IA 50314	Campaign Work	100.00
10/2/06	ID# CK# 1005	Mitch Henry 1900 M L King Des Moines, IA 50314	Reimburse Campaign Expense Postage & Printer Ink	52.74
10/4/06	ID# CK# 1006	Mitch Henry 1900 M L King Des Moines, IA 50314	Campaign Work	150.00
			SUB-TOTAL	$ 1129.96
			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(2)(f).)

(for Schedule B)

DEC-08-2006 12:28 PM P.09

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev 07/03)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)*

Joe Henry for City 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
10/9/06	ID# CK# 1007	Mitch Henry 1900 M L King Des Moines, IA 50314	Campaign Work	$ 150.00
10/11/06	ID# CK# 1008	Mitch Henry 1900 M L King Des Moines, IA 50314	Reimburse Campaign Expense - Postage and Printer Ink	29 92
10/14/06	ID# CK# 1009	Carter Printing 1739 E. Grand Ave Des Moines, IA 50316	Remittance Envelopes Lapel Stickers Yard Signs	750 00
10/16/06	ID# CK# 1010	Mitch Henry 1900 M L King Des Moines, IA 50314	Campaign Work	150 00
10/16/06	ID# CK# 1011	Deb Henry 1900 M L King Des Moines, IA 50314	Campaign Work	50 00
10/19/06	ID# CK# 1013	Mitch Henry 1900 M L King Des Moines, IA 50314	Reimburse Campaign Expenses - Postage, Printer Ink & Yard Sign Supplies	43 29
10/19/06	ID# CK# 1012	Litho Craft Printing 2803 SW 9th Des Moines, IA 50315	Business Envelopes and Letterhead	132 50
10/21/06	ID# CK# 1015	Mitch Henry 1900 M L King Des Moines, IA 50314	Campaign Work	150 00

SUB-TOTAL $ 1455.71

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)(b).)

(for Schedule B)

DEC-08-2006 12:28 PM P.10

FOR INSTRUCTIONS SEE BACK OF FORM

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)*

Joe Henry for City 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
11/8/06	ID# CK#	Iowa State Bank 6410 SW 9th St. Des Moines, IA 50315	Check Handling Fee	$ 20.00
11/14/06	ID# CK# 1016	Mitch Henry 1900 m L King Des Moines, IA 50314	Campaign Work	350.00
11/15/06	ID# CK# 1003	Des Moines Radio Group 1416 Locust Des Moines, IA 50309	Radio Advertising	1250.00
11/30/06	ID# CK# 1017	Carter Printing 1739 E. Grand Des Moines, IA 50316	Yard Signs	800.00
11/30/06	ID# CK# 1018	Des Moines Radio Group 1416 Locust Des Moines, IA 50309	Radio Advertising	1250.00
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL $3670.00

TOTAL *(if last page of this schedule)* $6255.67

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)(l).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS

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

Joe Henry for City Council

☐ CHECK THIS BOX IF AMENDING FORM

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

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*
10/19/06	Carter Printing 1739 E. Grand Ave Des Moines, IA 50316	Campaign Cards	$ 177.25
12/1/06	Carter Printing 1739 E. Grand Ave Des Moines, IA 50316	Campaign Postcards	547.17
12/1/06	Carter Printing 1739 E. Grand Ave Des Moines, IA 50316	Corrugated Signs	667.80

SUB-TOTAL $ 1392.22

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD $ 1392.22

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

Page 1 of 1 (for Schedule D)

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.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Joe Henry for City Council

SCHEDULE E (Rev. 08/97) — 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
8/17/06	Joe Henry 2463 SE Highview Dr. Des Moines, IA 50320	Self	Voter Disc Ward 4	$ 13.00	
10/8/06	Joe Henry 2463 SE Highview Dr. Des Moines, IA 50320	Self	Food and Beverages	$ 83.40	
11/15/06	Joe Henry 2463 SE Highview Dr. Des Moines, IA 50320	Self	Voter Disc Ward 4	13.00	
11/17/06	Joe Henry 2463 SE Highview Dr Des Moines, IA 50320	Self	Pizza for Volunteers	38.50	
12/1/06	Joe Henry 2463 SE Highview Dr. Des Moines, IA 50320	Self	Postage for Mailing	534.40	

SUB-TOTAL $ 682.30

TOTAL (If last page of this schedule) $ 682.30

*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.

DEC-08-2006 12:29 PM P.12