

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



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

RECEIVED FAX MAR 28 2007

Hockensmith for Supervisor

IMPORTANT: Indicate by # type of committee you are reporting for: 4 (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: Tom Hockensmith Political Party (if applicable): Democrat

Office Sought: Polk County Supervisor District (if Senate or House):

FORM DR-2 DISCLOSURE REPORT (Rev. 12/2005) For Office Use Only Comm. # Logged In Scanned Computer Audited 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.

Julie Kay Heun SIGNATURE OF PERSON FILING REPORT

515 263 1804 TELEPHONE

3/28/07 DATE SIGNED

I AM FILING A 12/31/2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED 01/06/2007

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 11/07/2006 County & Local Committees, enter County in which Election is held Polk

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$42,393.32), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: \$7,827.28, Schedule F: \$0.00, Schedule H: \$0.00), SUB-TOTAL (\$50,220.60), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: \$27,461.34, Schedule F: \$0.00), CASH ON HAND at the end of this reporting period (\$22,759.26).

Table with columns for description and amount. Rows include: UNPAID BILLS (\$0.00), IN KIND CONTRIBUTIONS (\$329.83), OUTSTANDING LOANS (\$0.00).

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 0.00

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

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" 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)

Hockensmith for 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
10/31/2006	ID# CK#	Community State Bank 1301 E Euclid Des Moines, IA 50316	interest earned	\$ <11.53>
11/01/2006	ID# CK#	Wells Print & Digital Services PO Box 1744 Madison, WI 53701-1744	Website & E-mail Hosting 8/1/06-1/31/07	240.00
11/01/2006	ID# CK#	Link Strategies 300 Walnut #5 Des Moines, IA 50309	mailing 5278 @ \$0.86	4539.08
11/02/2006	ID# CK#	Holly Sager 4018 E 24th Ct Des Moines, IA 50317	reimbursement for food and paper goods for volunteers	107.30
11/02/2006	ID# CK#	Dahls 3400 E 33rd Street Des Moines, IA 50317	postage/stamps	15.60
11/02/2006	ID# CK#	The Unin Shop PO Box 9867 Baltimore, MD 21286-9867	check printing	16.90
11/06/2006	ID# CK#	Holly Sager 4018 E 24th Ct Des Moines, IA 50317	reimbursement - food for volunteers	66.54
11/09/2006	ID# CK#	Qwest PO Box 91154 Seattle, WA 98111-9254	phone & internet service 10/28/06 - 11/27/06	97.60
SUB-TOTAL				\$ 5071.49
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 66A.402(3)(i).)

Page 2 of 4

(for Schedule B)

Reset Form

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

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

Hockensmith for Supervisor

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.)

PART I- NAME AND ADDRESS OF CONSULTANT

Name of Consultant Link Strategies		
Mailing Address 300 Walnut Suite 5		
City Des Moines, IA 50317	State	Zip Code

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

INDICATES CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From 08/01/2006	\$ 4,000.00
To 11/07/2006	

ESTIMATES OF PERFORMANCE

advice on campaign strategies, development of campaign mailings and brochures

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