

# DISCLOSURE SUMMARY PAGE

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

**IMPORTANT:** Indicate by # type of committee you are reporting for: 5  
 (1) Statewide/Legislative/Judge Standing for Re-election 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: *Gene Phillips* Political Party (if applicable) \_\_\_\_\_

Office Sought: *Polk County Supervisor Dist 4* District (if Senate or House) \_\_\_\_\_

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.

<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # _____	Logged In _____
Scanned _____	Computer _____
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

CAMPAIGN DISCLOSURE BOARD  
 OCT 18 2006  
 FILED  
 MD

*Gene Phillips* \_\_\_\_\_ *285-6370* \_\_\_\_\_ *10-17-06*  
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A October 19 - 2006 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 \_\_\_\_\_

County & Local Committees, enter County in which Election is held Polk.

## 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>0</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	\$	<u>6885.00</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>
<b>(Schedule H applies to Candidates' Committees Only)</b>		
<b>SUB-TOTAL</b>	\$	<u>6885.00</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	\$	<u>5153.05</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>1731.95</u>
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$	<u>0</u>
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$	<u>67.87</u>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$	<u>0</u>
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
<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

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Phillip's For 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.

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/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
8-25-06	ID# CK# 1424	Robert G. Mills 2751-99th # URBANDALE IA 50322	NO	\$ 500 <sup>00</sup>	
8-25-06	ID# CK# 3763	RANDAH L. Walters P.O. Box 71094 Clive IA 50325	NO	\$ 1000 <sup>00</sup>	
8-25-06	ID# CK# 2027	John C. KLINE 2171 GRAND AVE WEST DES MOINES IA 50265	NO	\$ 1000 <sup>00</sup>	
8-25-06	ID# CK# 4174	Curtis VAN Veldhuizen 1305-Burr Oaks Dr. West Des Moines Ia 50266	NO	\$ 500 <sup>00</sup>	
8-26-06	ID# CK# 8942	Rebecca h. Ogden no. 9th E. PARK AVE Des Moines Iowa 50315	NO	\$ 500 <sup>00</sup>	
8-30-06	ID# CK# 1050	Craig W. Mettikhle 2674-RAINIER Dr. Cedar Rapids Ia 52404	NO	\$ 500 <sup>00</sup>	
9-14-06	ID# CK# 1017	Bob Culuzzi P.O. Box 27061 West Des Moines Ia 50265	NO	\$ 500 <sup>00</sup>	
9-20-06	ID# CK# 1062	THOMAS J. & LADONNE M. GRATIAS 610- Southfork Dr. Waukee Iowa 50263	NO.	\$ 500 <sup>00</sup>	
9-21-06	ID# CK# 6302	GARY or DONNA DOWNEY 4931-75th CIR URBANDALE IA 50322	NO	\$ 500 <sup>00</sup>	
9-7-06	ID# CK# CASH	Robert Jones 2101-E. Army Post Rd Des Moines Ia 50320	NO	\$ 400 <sup>00</sup>	
SUB-TOTAL				\$ 5450 <sup>00</sup>	
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.

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Phillip's For 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.

**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/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
9-25-06	ID# CK# 8946	Jimmie Elza 9509-NW Newgate Dr. Johnston Ia 50131	NO	\$ 200.00	
9-27-06	ID# CK# 1700	Carolyn L. Beverly 3024-Deep Woods Ct. Des Moines Ia 50322	NO	\$ 75.00	
9-29-06	ID# CK# 13006	Robert D. Jones 2894-W. 140th St. S. Mitchellville Ia 50169	NO	\$ 1000.00	
9-27-06	ID# CK# 503000	U.S. Post Office (money order) Refund on Postage Rate	NO	\$ 1600.00	
	ID# CK#				
SUB-TOTAL				\$ 1435.00	
TOTAL (if last page of this schedule)				\$ 6885.00	

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FOR INSTRUCTIONS, SEE BACK OF 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)

*Phipps 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
8-28-06	ID# CK# 093	Secretary of State Voters List	Voters List Dist 4.	\$ 122.80
9-1-06	ID# CK# 094	Carter Printing 1739- E Grand Ave Des Moines Iowa 50316	YARD Signs	1438.95
9-6-06	ID# CK# 096	U.S. Post office 2nd & University Des Moines Ia Ia.	Bulk Rate Permit	320.00
9-12-06	ID# CK#	HARLAND Check's Checks PRINTED via - ACH payment.	checks Printed	19.95
9-14-06	ID# CK# 1001	Carter Printing 1739- E Grand Ave Des Moines Ia 50316	Door Hangers Printing	869.20.
10-02-06	ID# CK# 1002	CASH TO PAY Walker's	HAND OUT DOOR HANGERS	100.00.
10-3-06	ID# CK# 1003	CASH TO PAY Walker's	HAND OUT DOOR HANGERS	200.00
10-4-06	ID# CK# 1004	Office MAX 5020. SE 14th St. Des Moines Ia 50320	Office Supplies Rubber BANDS	20.31
SUB-TOTAL				\$ 3091.21
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)(i).)

FOR INSTRUCTIONS, SEE BACK OF 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.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Philhps 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
10-5-06	ID# CK# 1005	Carter Printing 1739-E. Grand Ave Des Moines Ia 50316	Printing Brochures	\$ 1862.42
10-06-06	ID# CK# 1006	Office MAX 2700-Engelsol Des Moines Ia 50312	Rubber Bands	45.70
10-10-06	ID# CK# 1007	Office MAX 5020-514th St. Des Moines Ia 50320	Office Supplies	10.16
10-14-06	ID# CK# 1008	CASH TO Pay Walker's	HAND out Brochures	100.00
10-14-06	ID# CK# 1009	CASEY PIZZA 2150- E. Army Post Rd. Des Moines Ia 50320	FOOD FOR WALKERS	43.56
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 2061.84
TOTAL (if last page of this schedule)				\$ 5153.05

**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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Phillips For Supervisor

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
8/22/06	GENE PHILLIPS	Self	Cash Paid For office Supplies	\$ 22.04	
8-23-06	GENE PHILLIPS	Self	Cash Paid For Dist maps	10.00	
8-26-06	GENE PHILLIPS	Self	Cash Paid For office Supplies	22.07	
9-2-06	GENE PHILLIPS	Self	Cash Paid For office Supplies	13.76	

SUB-TOTAL \$ 67.87  
 TOTAL (if last page of this schedule) \$ 67.87

\*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.