

DISCLOSURE SUMMARY PAGE

Folk

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>11188</u>
Logged In	<u>pm</u>
Scanned	
Computer	<u>pm</u>
Audited	

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

JOE MORR FOR SCHOOL BOARD

IMPORTANT: Indicate by # type of committee you are reporting for: 7

(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 MORR Political Party (if applicable) SEP - 8 2006

Office Sought SCHOOL BOARD MEMBER District (if Senate or House) _____

Late reports are subject to possible civil and criminal penalties.

[Signature]
SIGNATURE OF PERSON FILING REPORT

515-964-1340
TELEPHONE

9-7-2005
DATE SIGNED

I AM FILING A SEPTEMBER 8, 2005 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>SEPT. 13, 2005</u>
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) 1615.00

Schedule F: Loans Received total (Attach Schedule F)..... _____

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ _____

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)... 1314.46

Schedule F: Loan Repayments total (Attach Schedule F) _____

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....\$ 300.54

****UNPAID BILLS** (From Schedule D - Attach Schedule D)\$ _____

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)\$ 22.50

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F).....\$ _____

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES _____ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)
JOE MORR FOR SCHOOL BOARD

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
07.27.05	ID# CK#	TRODNEY A. LEIN 1201 SE MILLPOND CT #4301 ANKENY, IA 50021-6551		\$100.00	
08.05.05	ID# CK#	DONALD F. LAMBERTI 3601 SW GOLFOVIEW CR ANKENY, IA 50023		100.00	
08.08.05	ID# CK#	DONNA HUBER 2531 NE 97TH PL. ANKENY, IA 50021-9700		100.00	
08.11.05	ID# CK#	AARON CAMERON 414 NE NINTH ST ANKENY, IA 50021		25.00	
08.11.05	ID# CK#	MICHAEL P. STUBBERS 1210 N.W GREENWOOD ANKENY, IA 50023		25.00	
08.13.05	ID# CK#	DAVID G. HOOVER 3705 SW SKYVIEW CIRCLE ANKENY, IA 50023		25.00	
08.16.05	ID# CK#	RONALD G. FONTANA 1201 BEL-AIRE RD ANKENY, IA 50021		25.00	
08.16.05	ID# CK#	DEBORAH A. GROENE 723 36TH ST DES MOINES, IA 50312-3205		100.00	
08.19.05	ID# CK#	BARBARA J. WHITE 205 SE 7TH ST ANKENY, IA 50021		25.00	
08.19.05	ID# CK#	UNITEMIZED		15.00	
SUB-TOTAL				\$540.00	
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.

For Instructions, See Back of Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<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)

JOE MOER FOR SCHOOL BOARD

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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
08.22.05	ID# 8128 CK# 3034	INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES 1750 NEW YORK AVENUE N.W. WASHINGTON, DC 20006	VERIFIED STATEMENT REG. ENCLOSED	\$500 ⁰⁰	
08.25.05	ID# 6133 CK#	SOUTH CENTRAL IOWA FEDERATION OF LABOR AFL-CIO CITIZENSHIP FUND 300 E LOCUST SUITE 120 DES MOINES, IA 50309		300 ⁰⁰	
08.27.05	ID# CK#	JOHN E. LUNDSTROM 3708 SW GOODWIN ST ANKENY, IA 50023		50 ⁰⁰	
09.01.05	ID# CK#	DON E. PENQUITE 7111 N W FISHER LN. ANKENY, IA 50021		100 ⁰⁰	
09.02.05	ID# CK#	ROGER W. SPAHR 9855 NE FRISK DRIVE ANKENY, IA 50021		100 ⁰⁰	
09.04.05	ID# CK#	DAVID L. PALMER 213 SW FLYNN DR. ANKENY, IA 50023		25 ⁰⁰	
	ID# CK#				

SUB-TOTAL

\$1075⁰⁰

TOTAL (if last page of this schedule)

\$1615⁰⁰

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

COMMITTEE NAME (Must be same as on Statement of Organization)
 JOE MORR FOR SCHOOL BOARD

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK #	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09.04.05		1008 UNITEMIZED	PLASTIC TIES FOR SIGNS	1.84
08.17.05	ID# CK# 1000	THE COPY SHOP 225 SE ORALABOR SUITE 1 ANKENY, IA 50021 RD.	50 LAMINATED SIGNS	\$ 107.70
08.17.05	ID# CK# 1001	JOE MORR 1225 SW FRANKLIN CT. ANKENY, IA 50023	TAX TO COPY SHOP FOR ABOVE SIGNS	6.46
08.25.05	ID# CK# 1002	THE COPY SHOP 225 SE ORALABOR RD ANKENY, IA 50021	50 LAMINATED SIGNS	106.63
08.29.05	ID# CK# 1003	CARTER PRINTING CO. 1739 EAST GRAND AVE DES MOINES, IA 50316	1000 FLIERS	55.12
08.30.05	ID# CK# 1004	ANKENY PRESS CITIZEN PO BOX 9293 506 DES MOINES, IA 50316	3/4 LETTER PAGE AD	540.00
08.31.05	ID# CK# 1005	JOE MORR 1225 SW FRANKLIN CT. ANKENY, IA 50023	(STRAWBERRY PATCH) NAME SHIRT FOR PARADE AND MEETINGS	42.40
09.02.05	ID# CK# 1006	THE COPY SHOP 225 SE ORALABOR RD ANKENY, IA 50021	Four 3x3 DOUBLE SIGNS	347.68
09.02.05	ID# CK# 1007	THE COPY SHOP 225 SE ORALABOR RD ANKENY, IA 50021 SUITE 1	50 LAMINATED SIGNS	106.63
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1314.46

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).)

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12th, SUITE 1A
 DES MOINES, IA 50319
 www.iowa.gov/ethics

Reset Form

**VERIFIED STATEMENT REGISTRATION
 (Out-of-State Committee)**

COMMITTEES NOT ORGANIZED IN IOWA TO COMPLETE IN DUPLICATE.
 SEND A COPY TO THE BOARD WITHIN 15 DAYS OF THE CONTRIBUTION DATE AND
 ONE COPY WITH EACH CONTRIBUTION TO THE IOWA COMMITTEE WITH THE CONTRIBUTION.
 PLEASE REFER TO DETAILED INSTRUCTIONS ON BACK OF FORM.
THIS FORM MUST BE FILED FOR EACH CONTRIBUTION IN EXCESS OF \$50

Form	VERIFIED STATEMENT REGISTRATION (Out-of-State Committees) (Rev. 03/05)
For office use only	
Comm. #	_____
Indexed	_____
Audited	_____
Checked	_____
Computer	_____

COMMITTEE NAME

Official Name of Out-of-State Committee (Do not abbreviate committee name. Written explanation must be provided for Acronym). International Union of Painters & Allied Trades Political Action Committee	
Mailing Address 1750 New York Avenue, NW	
City, State, Zip Code Washington, DC 20006	Area Code & Telephone No. (202) 637-0700

CONTACT PERSON FOR THE COMMITTEE:

Sandra Brooks	
Name 1750 New York Avenue, NW	Washington, DC 20006
Mailing Address SBrooks@iupat.org	City, State, Zip (202) 637-0772
Email Address (Optional)	Area Code & Telephone Number

Purpose of Committee/Contribution : (Please indicate by checking appropriate box)

- Candidate Ballot Issue PAC Other PAC Party (State or Central Committee)

STATE OR FEDERAL JURISDICTION WHERE COMMITTEE IS REGISTERED OR OPERATES

PARENT ENTITY, AFFILIATE, SPONSOR OF COMMITTEE
 (Use separate page if needed to list more than one entity)

Name of Jurisdiction Federal Election Commission
Mailing Address 999 E Street, NW
City, State, Zip Code Washington, DC
Area Code & Telephone No. (202) 694-1100

Name International Union of Painters & Allied Trades
Mailing Address 1750 New York Avenue, NW
City, State, Zip Code Washington, DC 20006

IOWA RESIDENT AGENT

Typed Name of Iowa Resident Mrs. Deborah Groene	
Mailing Address 723 36th Street	
City, State, Zip Code Des Moines, IA 50312	Area Code & Telephone No. (515) 289-0482

IOWA COMMITTEE RECEIVING CONTRIBUTION

Name of Committee Joe Morr for School Board		
Mailing Address 409 S.W. Walnut Street Ankeny, IA 50023		
Date 08/17/2005	If In-Kind Contribution, Describe	
Amount \$ 500.00	Check # 3034	Committee ID #

VERIFIED STATEMENT OF COMMITTEE:

1 GEORGE GALIS, attest that the contribution reported above is accurate and that the information about this out-of-state committee is correct and accurate to the best of my knowledge. I also attest that the reports filed in the named jurisdiction comply with requirements that are substantially similar to Iowa Code section 68A402A6, including the disclosure of all contributions received and all expenditures made. I further attest that the contribution reported above was made from an account that does not accept contributions from corporations or other prohibited contributors under Iowa Code section 68A.503, unless the Iowa recipient committee is a ballot issue committee. I understand that potential civil and criminal penalties may apply unless a copy of this form has been filed with the Iowa Ethics and Campaign Disclosure Board within 15 days of the date of the contribution.

George Galis (Person submitting form) TREASURER (Title) 8-29-05 (Date)