

FOR INSTRUCTIONS, SEE BACK OF FORM

### DISCLOSURE SUMMARY PAGE

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

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

The Committee to Elect Matt Schultz

**IMPORTANT:** Indicate by # type of committee you are reporting for: 5

( 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 Matthew Schultz	Political Party (if applicable)
Office Sought Council Bluffs City Council	District (if Senate or House)

**RECEIVED**  
 FAX  
 JAN 23 2006

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.

*Matthew Schultz* (712) 256-4681 01/19/06

SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A Non-Election REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR

(report date) Indicate by # 2

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

<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.)	\$ 934.67
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	\$ 1,120.00
Schedule F: Loans Received total (Attach Schedule F)	0
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0
<u>(Schedule H applies to Candidates' Committees Only)</u>	
<b>SUB-TOTAL</b>	\$ 2,054.67
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	1849.11
Schedule F: Loan Repayments total (Attach Schedule F)	0
<b>CASH ON HAND</b> at the end of this reporting period (If final report balance must be zero) (Attach DR-3)	\$ 205.56
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$ 0
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$ 0
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$ 1,000.00
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)	YES NO
<b>CANDIDATE COMMITTEES ONLY:</b>	
<b>VALUE OF CAMPAIGN PROPERTY</b> (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



<b>SCHEDULE</b> <b>A</b> (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)

*The Committee to Elect Matt SCHULTZ*

**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
11/4/05	ID# CK#	Charles Smith 25 Horizon Council Bluffs, IA 51503		\$ 50.00	<input type="checkbox"/>
11/4/05	ID# CK#	Robert Blue 17951 Bent Tree Ridge Council Bluffs, IA 51503		\$ 300.00	<input type="checkbox"/>
11/4/05	ID# CK#	Ken Peterson 242 Warren St. Council Bluffs, IA 51503		\$ 100.00	<input type="checkbox"/>
11/4/05	ID# CK#	Jeff Ballenger 12626 Greystone Ct. Council Bluffs, IA 51503		\$ 200.00	<input type="checkbox"/>
11/9/05	ID# CK#	Marvin Keickhafer 130 McKenzie Cr. Council Bluffs, IA 51503		\$ 25.00	<input type="checkbox"/>
11/9/05	ID# CK#	Linda Schmidt 29331 Coldwater Ave. <del>Wancy Creek</del> Council Bluffs, IA 515		\$ 10.00	<input type="checkbox"/>
11/9/05	ID# CK#	Dennis & Nancy Lowman 5704 N. Waterbury Rd. Des Moines, IA		\$ 15.00	<input type="checkbox"/>
11/17/05	ID# CK#	Unitemized		\$ 20.00	<input type="checkbox"/>
11/17/05	ID# CK#	Travis Wilson 2607 S. 3rd St. Plz Omaha, NE 68108		\$ 250.00	<input type="checkbox"/>
11/23/05	ID# CK#	Gary & Barbara Woods 12 Westlake Village Council Bluffs, IA 51501		\$ 50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 1,020.00

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

**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)  
*The Committee to Elect Matt Schultz*

**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
11/23/05	ID# CK#	Matthew Schultz 376 Benton St. Council Bluffs, IA 51503	CADIDATE	\$ 100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL  
 \$ 100  
**TOTAL (if last page of this schedule)**  
 \$ 1,120.<sup>00</sup>

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**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)  
*The Committee to Elect Matt Schultz*

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
11/3/05	ID# CK#	Rutledge & Associates 807 32 <sup>nd</sup> Ave Council Bluffs, IA 51501	Production of TV Commercial and 131 Cox Cable TV Advs.	\$ 750.00
11/4/05	ID# CK#	Copy Cat 225 W. Broadway Council Bluffs, IA 51503	Printing of 1500 Flyers	\$ 86.67
11/4/05	ID# CK#	DAILY NON-PAREIL 535 W. Broadway Council Bluffs, IA	Newspaper Advertising	\$ 160.00
11/16/05	ID# CK#	TISH'S 1207 S. 35th St. Council Bluffs, IA 51501	Campaign Event Food, Drinks, Venue	\$ 285.00
11/17/05	ID# CK#	Papa Murphy's Pizza 1702 W. Broadway Council Bluffs, IA 51501	10 large Pizza's Campaign Event	\$ 74.90
11/23/05	ID# CK#	Victory Enterprises 5200 SW 30th Davenport, IA 52802	Automated Phone Calls	\$ 492.54
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1849.11
TOTAL (If last page of this schedule)				\$ 1849.11

**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).)

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SCHEDULE <b>F</b> (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
The Committee to Elect Matt Schultz

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1,000.00

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**  
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ \_\_\_\_\_

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
 (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II) \$ 0

From Schedule E - TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,000.00

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Jan. 23 2006 07:58PM P6

FAX NO. :

FROM :