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DISCLOSURE SUMMARY PAGE

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

For Office Use Only
Comm. # _____
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File with:
Iowa Ethics and Campaign Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-3701

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Fischer 4 Supervisor

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: Dean R. Fischer
Political Party (if applicable): Democrat
Office Sought: County Supervisor
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.

Dean Fischer — **SIGNATURE OF PERSON FILING REPORT**
712-485-2019 — **TELEPHONE**
1-15-07 — **DATE SIGNED**

I AM FILING A 10/15/06 – 12/31/06 REPORT FOR (1) **ELECTION** (2) **NON-ELECTION** YEAR.
(report date) Indicate by # 5

☑ 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: 11-07-06
County & Local Committees, enter County in which Election is held: Pottawattamie

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.) ..... $ 536.49

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) ..... $ 600.00
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 ..... $ ~~600.00~~ 1136.49

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 1010.91
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) ..... $ 125.58

****UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... $ 0
***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... $ 0
****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

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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)*
Fischer 4 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
10-20-06	ID# CK# 1623	Democratic Pott County PO Box 233 Co Bluffs Ia 51502		$ 100.00	✓
10-26-06	ID# CK# 12447	William K. Keister 1235 Wedgewood Dr Co Bluffs Ia 51503		10.00	✓
10-26-06	ID# CK# 4559	Dennis & Judy Ryan 21962 240th Underwood Ia 51576	cousin	25.00	✓
10-26-06	ID# CK# 8558	John Erixon 22279 Old Lincoln Hwy Crescent Ia 51526		25.00	✓
10-26-06	ID# CK# 5933	Lawrence & Judy Raulin 1405 Skyline Dr Co Bluffs Ia 51503	cousin	25.00	✓
10-26-06	ID# CK# 10084	Dave & Sara Fischer 316 Hwy Neola Ia 51559	son & daughter in law	25.00	✓
10-26-06	ID# CK# 3081	Joan Hartwell 18806 290th St Macclelland Ia 51548		40.00	✓
10-26-06	ID# CK# 2416	L.G. FORD 15540 Bobbylin Co Bluffs Ia 51503		100.00	✓
10-26-06	ID# CK# 2564	Charles Wredt 13579 Berryhill Ave. Co Bluffs Ia 51503		25.00	✓
10-26-06	ID# CK# 1503	Emily Sullett 1020 W 26th St Co Bluffs Ia 51501		25.00	✓
			SUB-TOTAL	$ 400.00	
			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

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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)*
Fischer 4 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
10-26-06	ID# CK# Cash	Pass the Hat		$50.00	✓
10-29-06	ID# CK# 2162	Jay Poitevin PO Box 403 Prairie City Ia 50228		100.00	✓
11-3-06	ID# CK# 8962	Jewel Thomas 3396 335th Neola Ia 51559		50.00	✓
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 200.00

TOTAL ***(if last page of this schedule)*** $ 600.00

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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)*
Fischer 4 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
10/18/06	ID# CK# 1015	The Journal/Herald	Vote Nov 7th Ad Run for 2 weeks / 2 Papers	$ 96.00
10-18-06	ID# CK# 1016	The Nonpareil Co Bluffs Ia 51503	Fundraiser Ad for 2 Days w/ Picture	$ 248.10
10-27-06	ID# CK# 1019	The Nonpareil Co Bluffs Ia 51503	Ad For Vote Nov 7th Run 5 days	350.00
10-20-06	ID# CK# 1017	The Gazette Neola Ia 51559	Ad For Vote Nov 7th Run 2 days (2 weeks)	48.45
10-26-06	ID# CK# 1018	Pizza King Co Bluffs Ia 51503	Fundraiser Supper	101.82
11-25-06	ID# CK# 1020	Dean Fischer Neola Ia 51559	Reimbursement for Stamps & Campaign Ad.	166.54
	ID# CK#			
	ID# CK#			

SUB-TOTAL $ 1010.91

TOTAL (*if last page of this schedule*) $ 1010.91

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 Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
☐ CHECK THIS BOX IF AMENDING FORM	

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

Fischer 4 Supervisor

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

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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*
10-27-06	Dean R Fischer 28950 298th Neola Ia 51559	80.00 cash P.Chak 47.54 = Help pay for Campaign Ad.	$ 127.54
10-27-06	Dean R Fischer 28962 298th Neola Ia 51559	Postage Stamps	39.00
		PD 11-25-06 CK# 1020	

SUB-TOTAL $ 166.54

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD $ 0

*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.