

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically. Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization) Friends of Extension
IMPORTANT: Indicate by # type of committee you are reporting for: 11
(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 Political Party (if applicable)
Office Sought District (if Senate or House)

FORM DR-2 (Rev. 12/2009) DISCLOSURE REPORT
For Office Use Only
Comm. #
Logged In
Scanned
Computer
Audited
OCT 25 PM 3:12

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

SIGNATURE OF PERSON FILING REPORT: [Signature] TELEPHONE: 712-292-3323 DATE SIGNED: 10-25-10

I AM FILING A 10/22/2010 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 11/02/2010
County & Local Committees, enter County in which Election is held Pottawattamie

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (1,521.40), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 890.00, Schedule F: Loans Received total, Schedule H: Total Sales of Campaign Property), SUB-TOTAL (2,411.40), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: Expenditures total (1,775.42), Schedule F: Loan Repayments total), CASH ON HAND at the end of this reporting period (635.98), **UNPAID BILLS (0.00), **IN KIND CONTRIBUTIONS (0.00), **OUTSTANDING LOANS (0.00), CONSULTANT BREAKDOWN (YES checked), CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (0.00), STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

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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)
 Friends of Extension

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/YY)	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
10/18/2010	ID# CK#	Gary D. Woods 12 Westlake Village Council Bluffs, IA 51501		\$100.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Duane Warden 20131 Perry Rd. Council Bluffs, IA 51503		25.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Jodi Volkens Box 415 Treynor, IA 51575		50.00	<input type="checkbox"/>
10/18/2010	ID# CK#	William Hiller 25582 Hickory Rd. McClelland, IA 51548		25.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Betty Clark 2 Decatur Cir. Council Bluffs, IA 51503		50.00	<input type="checkbox"/>
10/18/2010	ID# CK#	James Sealock 21550 Homestead Ave. Council Bluffs, IA 51503		50.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Brian Mainwaring 205 Cloverdale Dr. Council Bluffs, IA 51503		50.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Ed Chance 812 Hawthorne Court Council Bluffs, IA 51503		10.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Sandra Seidler 21802 Homestead Ave. Council Bluffs, IA 51503		50.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Alan Behrens 109 Wilshire Ave. Council Bluffs, IA 51503		50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 460.00

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
<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)
Friends of Extension

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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
10/18/2010	ID# CK#	Patrick Ellsworth 24102 Harvest Lane Council Bluffs, IA 51503		\$25.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Jane Goldsmith 18787 290th St. Trevnor, IA 51575		50.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Margarite Goodenow P.O. Box 417 Council Bluffs, IA 51503		20.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Douglas Irwin 1949 Parkwild Dr Apt 108 Council Bluffs, IA 51503		15.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Elwyn Rollins 25 Lamar Dr Trevnor, IA 51575		5.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Lea Voss 25232 Jaguar Loop Underwood, IA 51576		50.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Mary Ravlin 24136 Juniper Rd. Underwood, IA 51576		100.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Kathryn Schlott 1019 Arbor Ridge Circle Council Bluffs, IA 51503		25.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Brian Hunter 274 Elmwood Dr. Council Bluffs, IA 51503		25.00	<input type="checkbox"/>
10/18/2010	ID# CK#	E.J. Fischer 31999 280th St. Neola, IA 51559		25.00	<input type="checkbox"/>

SUB-TOTAL

\$ 340.00

TOTAL (if last page of this schedule)

\$

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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)

Friends of Extension

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.

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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
10/18/2010	ID# CK#	Owen Darrington 602 3rd St. Underwood, IA 51576		\$15.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Stanley Grote 130 Elmwood Dr. Council Bluffs, IA 51503		25.00	<input type="checkbox"/>
10/18/2010	ID# CK#	Jimmie Andersen 70 Cottner Dr. Council Bluffs, IA 51503		25.00	<input type="checkbox"/>
10/19/2010	ID# CK#	Matt Garst 520 Oakland Ave. Council Bluffs, IA 51503		25.00	<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"/>

SUB-TOTAL

\$ 90.00

TOTAL (if last page of this schedule)

\$ 890.00

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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)
Friends of Extension

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
10/18/2010	ID# CK# 0005	United States Postal Service, Council Bluffs, Iowa 51503	Postage	\$ 112.00
10/18/2010	ID# CK# 0006	The Daily Nonpareil 535 W Broadway Council Bluffs, IA 51503	Newspaper Ads.	1346.98
10/20/2010	ID# CK# 0007	Walker Printing 1824 2nd Ave Council Bluffs, IA 51501	Door Hangers	316.44
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1775.42

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).)