

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



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

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

Minard for 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 <u>Larry E. Minard</u>	Political Party (if applicable) <u>Republican</u>
Office Sought <u>County Supervisor</u>	District (if Senate or House) <u>Scott County</u>

Late reports are subject to possible civil and criminal penalties.

[Signature]
SIGNATURE OF PERSON FILING REPORT

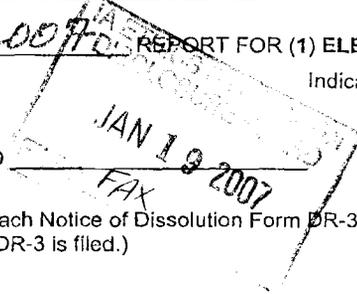
(823) 508-4649
TELEPHONE

1/19/07
DATE SIGNED

I AM FILING A January 19, 2007 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 <u>SCOTT</u>

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.)\$ 2940.04

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 140.00

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\$ 3080.04

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 3080.04

Schedule F: Loan Repayments total (Attach Schedule F)..... -0- loan forgiven

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)\$ -0-

**UNPAID BILLS (From Schedule D - Attach Schedule D)\$ none

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ 255

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$ none

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)\$ -0-

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Memoir for Supervisors

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
10/26/06	ID# CK# 1535	Thomas + Toni Dittman 12090 240th St. Edwidge, IA 52748	None	\$ 25 ⁰⁰	
10/2/06	ID# CK# 4066	Leslie + Roy Schenck 2702 Harmony Drive Bettendorf, IA 52722	"	15 ⁰⁰	
10/13/06	ID# CK# 2199	Lee Schneider 3113 Canal Street Dr. LeClaire, IA 52753	"	100 ⁰⁰	
	ID# CK#				

SUB-TOTAL

\$
\$ 140⁰⁰

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) (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.

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Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
Minard 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
10/19/06	ID# CK# 1111	Q.C. Times 500 E 3rd St. Davenport, IA 52801	advertising	\$ 632.64
10/19/06	ID# CK# 1112	The Catholic Messenger 736 Federal St. Davenport, IA 52803	advertising	253.60
10/19/06	ID# CK# 1113	The Catholic Messenger 736 Federal St. Davenport, IA 52803	advertising	175.73
10/19/06	ID# CK# 1114	Bullocke 599 S. 63rd Davenport, IA 52807	mailing	647.66
10/24/06	ID# CK# 1115	Bettendorf Jaycees Dorinda Lane Rd Bettendorf, IA 52722	parade entry fees	10.00
10/24/06	ID# CK# 1116	Davenport Printing Co 320 Brady Davenport, IA 52801	printing	143.40
10/26/06	ID# CK# 1117	Scott County Republicans 5020 Center Ct Bettendorf, IA 52722	reimbursement for printing costs	415.97
11/10/06	ID# CK# 1118	Green Members 3030 Brady St. Davenport, IA 52803	flowers for office staff	83.31
SUB-TOTAL				\$ 2362.31
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).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
Minnel 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
<i>12/12/06</i>	ID# CK# <i>1119</i>	<i>Davenport Printing Co 320 Brady Davenport, IA 52801</i>	<i>printing</i>	\$ <i>175.00</i>
<i>1/15/07</i>	ID# CK# <i>1120</i>	<i>The Keller Restaurant 137 S. State St. Camas, IL</i>	<i>a dinner for campaign helpers</i>	<i>195.00</i>
<i>1/19/07</i>	ID# CK#	<i>Cashier's Check #5930684037 from Quid City Bank</i>		
	ID# CK#	<i>2118 W. 26th Rd Bettendorf, IA 52722 to Davenport Schools Foundation</i>		<i>332.73</i>
<i>1/15/07</i>	ID# CK#	<i>Quid City Bank</i>	<i>bank charges</i>	<i>15.00</i>
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ <i>717.73</i>
TOTAL (if last page of this schedule)				\$ <i>3080.04</i>

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

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

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
<i>9/22/99</i>	<i>Larry E. Minard 2743 Elm St. Davenport, IA 52803</i>	<i>same</i>	<i>loan</i>	\$ <i>2523.58</i>	
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$ <i>2523.58</i>	

*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.

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

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

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 2523.58

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

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

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
	<i>None</i>		\$

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT REPAY
	<i>None</i>		\$

TOTAL (PART I) \$ _____

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E - TOTAL LOANS FORGIVEN \$ 2523.58

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ -0-

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