

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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

STAFFORD FOR SCHOOL BOARD

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

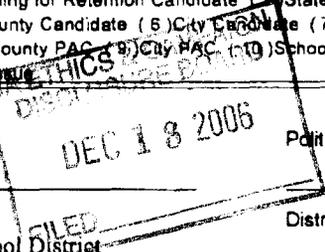
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name: John D. Stafford Political Party (if applicable): _____

Office Sought: Board Member Ames Iowa School District District (if Senate or House): _____

| | |
|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| FORM DR-2 (Rev. 12/2005) | DISCLOSURE REPORT |
| For Office Use Only | |
| Comm. # _____ | |
| Logged In _____ | |
| Scanned _____ | |
| Computer _____ | |
| Audited _____ | |
| File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701 | |



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.

John D. Stafford
 SIGNATURE OF PERSON FILING REPORT

515-292-0572
 TELEPHONE

10-13-06
 DATE SIGNED

I AM FILING A Final Report 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 09/12/06 |
| County & Local Committees, enter County in which Election is held Story County |

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.) | \$ 201.51 |
| ADD TOTAL MONEY TAKEN IN THIS PERIOD | |
| Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) | 75.00 |
| 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 | \$ 276.51 |
| SUBTRACT TOTAL MONEY SPENT THIS PERIOD | |
| Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) | 276.51 |
| 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) | \$ 0.00 |
| **UNPAID BILLS (From Schedule D - Attach Schedule D) | \$ _____ |
| *IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) | \$ 21.00 |
| **OUTSTANDING LOANS (From Schedule F - Attach Schedule F) | \$ _____ |
| CONSULTANT BREAKDOWN (Schedule G Attached?) | ___ YES ___ NO |
| CANDIDATE COMMITTEES ONLY: | |
| VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) | \$ _____ |
| STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year. | |

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)
STAFFORD 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

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 |
|--------------------------|----------------------------------------------------|-------------------------------------------------------|--------------------------------------------|-----------------|-----------------------------|
| 09/07/06 | ID# CK# 6984 | James Twetten 2915 Monroe Circle Ames, IA 50010 | N/A | \$50.00 | <input type="checkbox"/> |
| 09/07/06 | ID# CK# 2823 | John Schafer 520 Crawford Ave. Ames, IA 50010 | N/A | 25.00 | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
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| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |

SUB-TOTAL \$ 75.00

TOTAL (if last page of this schedule) \$ 75.00

* 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



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

| | |
|--------------------------------------|--------------------------|
| SCHEDULE B (Rev. 07/03) | MONETARY EXPENDITURES |
|--------------------------------------|--------------------------|

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)
STAFFORD FOR SCHOOL BOARD

| 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 |
|----------------------------------------------|----------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------------------------|------------------|
| 09/06/06 | ID# CK# 1003 | Ames Tribune 317 5th Street Ames, IA 50010 | Newspaper ad in Sept. 10th edition of the Ames Tribune | \$ 97.60 |
| 09/08/06 | ID# CK# 1004 | KASI Radio 415 Main Street Ames, IA 50010 | Production and Air-Time for 30 second radio ad to run Sept. 11 & 12; 5 times | 100.00 |
| 09/08/06 | ID# CK# 1005 | US Post Office Ames, IA, 50010 | 20 each 1st class stamps and 15 post card stamps | 11.40 |
| 09/15/06 | ID# CK# 1006 | Target 320 S. Duff Ave. Ames, IA | Package of Thank You notes | 6.41 |
| 10/13/06 | ID# CK# 1007 | John Stafford 2932 Somerset Drive Ames, IA 50010 | Reimbursement for: Post Card Forms \$12.58 100 Post Card Stamps \$24.00 | 43.30 |
| | ID# CK# | | FMV Campaign Button Materials \$4.50 FMV Laser Printing \$2.22 | |
| 08/15/06 | ID# CK# N/A | 1st National Bank of Ames 5th & Burnett Ames, IA 50010 | Check Printing Charges directly debited from account | 17.80 |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ 276.51 |
| TOTAL (if last page of this schedule) | | | | \$ 276.51 |

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 88A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

| | |
|-------------------------------------------------------------|--------------------------|
| 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 |
|--------------------------|-----------------------------------------------------|---------------------------------------------|-------------------------------------|-----------------------------|-----------------------------------|
| 09/05/06 | Jane Acker 2107 Graeber St. Ames, IA 50010 | | Refreshments for meet the candidate | \$ 6.00 | <input type="checkbox"/> |
| 09/06/06 | Marcia Steed 2401 Kingston Dr. Ames, IA 50010 | | Refreshments for meet the candidate | 15.00 | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
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| | | | | | <input type="checkbox"/> |

SUB-TOTAL \$ 21.00

TOTAL (if last page of this schedule) \$ 21.00

*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.