

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

Reset Form

IOWA ETHICS AND
CAMPAIGN DISCLOSURE BOARD

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

2009 JAN -6 AM 9:44

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

IMPORTANT: Indicate by # type of committee you are reporting for: 2
 (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

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>18449</u>
Logged	<input checked="" type="checkbox"/>
Scanned	<input type="checkbox"/>
Computer	<input type="checkbox"/>
Audited	<input type="checkbox"/>

CANDIDATE COMMITTEES ONLY:

Candidate Name <u>Kendall Jordan</u>	Political Party (if applicable) <u>Democrat</u>
Office Sought <u>Tama Co Dist 2 Supervisor</u>	District (if Senate or House)

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 686.32A(7) and 68A.401(3), the candidate, for a

Andrew Jordan (u) 484-6508 1-6-09
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 12-31-08 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
11-4-08
 County & Local Committees, enter County in
 which Election is held
Tama

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.)	\$	<u>0</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		<u>0</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only)		<u>0</u>
SUB-TOTAL	\$	<u>0</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>0</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero)	\$	<u>0</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>328.81</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES	<input checked="" type="checkbox"/> NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0</u>

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Jordan for Supervisor

Receipt Form

SCHEDULE E (Rev. 08/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR / SELF	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/24/08	to Kendall Jordan Tama Grundy Publishing PO Box 118 Tama IA 52339	N/A Self	Postcard Printings / Advertisement	\$ 133.69	<input type="checkbox"/>
11/16/08	to Tama Grundy Publishing PO Box 118 Tama IA 52339	N/A Self	"Vote for Kendall" Advertisement	130.08	<input type="checkbox"/>
11/26/08	to Tama Grundy Publishing PO Box 118 Tama IA 52339	N/A Self	Thank you Ad	65.04	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$

TOTAL (if last page of this schedule) \$ 328.81

*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.