

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

E. 006
Washington

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>21401</u>
Logged In	
Scanned	<u>DM</u>
Computer	<u>DM</u>
Audited	<u>DM</u>
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th St., 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

RECEIVED
MAR 14 2007

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Common Sense

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

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.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED March 14, 2007

I AM FILING A 1/19/07 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by #

CHECK IF AMENDMENT TO REPORT DATED 1/19/07

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

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.)	\$ 923.00
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1,142.53
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ 2,065.53
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	2,042.72
Schedule F: Loan Repayments total (Attach Schedule F)	0.00
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 22.81
*UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0.00
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 0.00
*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 0.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO
CANDIDATE COMMITTEES ONLY:	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ 0.00

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

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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)
Citizens for Common Sense

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
4/18/06	ID# CK#	Steve Chalupa 2731 Airport Road Washington, IA 52353		\$25.00	<input type="checkbox"/>
4/19/06	ID# CK#	Jim Blakeney 521 S. Marion Ave. Washington, IA 52353		100.00	<input type="checkbox"/>
4/20/06	ID# CK#	Hora Farms 2641 240th St. Washington, IA 52353		100.00	<input type="checkbox"/>
4/20/06	ID# CK#	Tom Shepherd 2581 Sockum Ridge Rd. Washington, IA 52353		100.00	<input type="checkbox"/>
4/20/06	ID# CK#	Doug Enfield		100.00	<input type="checkbox"/>
6/2/06	ID# CK#	Citizens for Quality Schools--Joint Marketing		717.53	<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				\$ 1142.53	
TOTAL (if last page of this schedule)				\$ 1142.53	

* 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.

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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)
Citizens for Common Sense

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
4/19/06	ID# CK#	Paul Dorr--Copperhead Consulting PO Box 188 Ocheyedan, IA 51354	Consulting	\$ 500.00
4/19/06	ID# CK#	Federation Bank 102 East Main St. Washington, IA 52353	Wire Fee	15.00
6/2/06	ID# CK#	Bob McConnell 23 Enfield Rd. St. Louis, MO 63132	Reimbursement for advertisement-- Wash. Evening Journal & Print Shop	313.75
6/2/06	ID# CK#	Mike Hora 2641 240th St. Washington, IA 52353	Reimbursement for advertisement	494.44
6/2/06	ID# CK#	Federation Bank 102 East Main St. Washington, IA 52353	Cashier check fee	2.00
6/2/06	ID# CK#	Bob McConnell 23 Enfield Rd. St. Louis, MO 63132	Reimbursement for pamphlets printed at Print Shop (Joint Marketing w/ Citizens for Quality Schools)	717.53
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 2042.72
TOTAL (If last page of this schedule)				\$ 2042.72 ✓

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)(f).)

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SCHEDULE G (Rev. 02/96)	BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Citizens for Common Sense

PART II- ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)

PART I - NAME AND ADDRESS OF CONSULTANT

Name of Consultant Paul Dorr		
Mailing Address PO Box 188		
City	State	Zip Code
Ocheyedan, IA		51354

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
			\$

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From <u>April 2006</u>	\$ <u>500.00</u>
To <u>July 2006</u>	

ESTIMATES OF PERFORMANCE

SUB-TOTAL	\$
TOTAL (If last page of this schedule)	\$