

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, 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.

2010 NOV 17 AM 8:47

Reset Form

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
MIKE CLAYTON FOR TREASURER

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 \_\_\_\_\_ Political Party (if applicable) \_\_\_\_\_  
Office Sought \_\_\_\_\_ District (if Senate or House) \_\_\_\_\_

<b>FORM DR-2</b> (Rev. 12/2009)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

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 a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Dennis W. Menefee      712-270-3327      11/15/10  
SIGNATURE OF PERSON FILING REPORT      TELEPHONE      DATE SIGNED

I AM FILING A \_\_\_\_\_ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date)      Indicate by #

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 _____

## STATEMENT OF CASH ON HAND

<b>CASH ON HAND</b> at the beginning of the reporting period. (Total of all funds held by the committee. This amount <b>MUST</b> 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.) .....	\$	93.91
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) .....		575.00
Schedule F: Loans Received total (Attach Schedule F) .....		
Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....		
<b>(Schedule H applies to Candidates' Committees Only)</b>		
<b>SUB-TOTAL</b> .....	\$	668.91
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) .....		668.91
Schedule F: Loan Repayments total (Attach Schedule F) .....		
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) .....	\$	0.00
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D) .....	\$	2,026.30
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	\$	825.00
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F) .....	\$	1,000.00
<b>CONSULTANT BREAKDOWN</b> (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

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SCHEDULE <b>A</b> (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)  
MIKE CLAYTON FOR TREASURER

**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
10/18/10	ID# CK# 5958	Robert Knowler 4001 Old Lakeport Rd Sioux City, IA 51106		\$400	<input type="checkbox"/>
10/26/10	ID# CK# 10105	Robert and Teresa Paulsrud 5023 320th St Danbury, IA 51019		25	<input type="checkbox"/>
11/1/10	ID# CK# 3291	William R. Anderson 1138 Mason Ave Pierson, Ia 51048		125	<input type="checkbox"/>
11/05/10	ID# Visa 3904 CK#	Dick Hallowell 3164 335th St Smithland, IA 51056		25	<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  
\$  
\$ 575

**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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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
MIKE CLAYTON FOR TREASURER

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
10/21/10	ID# CK# 1037	Moville Record PO Box AE Moville, IA 51039	Newspaper Ad	\$ 174
10/21/10	ID# CK# 1038	Sioux Valley News 126 E. Main Anthon, IA 51004	Newspaper Ad	160
10/21/10	ID# CK# 1039	Danbury Review PO Box 207 Danbury, IA 51019	Newspaper Ad	118
11/10/10	ID# CK# 1020	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Payment toward personal debt of \$2243.21. Brings debt down to \$2026.30.	216.91
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 668.91</b>

**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).)

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

MIKE CLAYTON FOR TREASURER

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**Reset Form**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
03/22/10	Michael Clayton 3600 Transit Sioux City, IA 51106	2,500 Red, White, Trevi Pens	\$ 568.24
04/03/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Candy for Parade	39.89
04/22/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Laser Labels and Envelopes	60.17
04/22/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Supplies for Yard Signs	11.34
04/26/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Copy Paper	34.14
04/26/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Sign at Smithland, IA	17.87
05/02/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Magnets for Signs	19.20
SUB-TOTAL			\$ 750.85
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			\$

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

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

MIKE CLAYTON FOR TREASURER

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**Reset Form**

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS – SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
05/05/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Monogram	\$ 13.90
05/06/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Materials for Merville, IA sign	47.60
05/06/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Wood treatment for Merville, IA sign	14.96
05/28/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	T-Shirts from T'S 2 Pleeze	89.88
06/09/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Thank You's	440.00
06/17/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Meals for planning meeting	147.17
07/03/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Candy for parade	32.17
SUB-TOTAL			\$ 785.68
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			\$

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

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

MIKE CLAYTON FOR TREASURER

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**Reset Form**

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS – SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
07/16/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Candy for parade	\$ 83.55
08/13/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Candy for parade	61.53
08/14/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Candy for parade	71.79
08/20/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Envelopes	12.55
09/06/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Materials for signs	81.87
09/26/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Materials for signs	71.39
10/22/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Color Ad Ryan Publishing Co Whiting, IA	204.00
<b>SUB-TOTAL</b>			\$ 586.68
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			\$

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

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

MIKE CLAYTON FOR TREASURER

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**Reset Form**

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/21/10	Michael Clayton 3600 Transit Ave Sioux City, IA 51106	Color Ad The Advocate Sergeant Bluff, IA	\$ 120.00
SUB-TOTAL			\$ 120.00
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			\$ 2,243.21

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 MIKE CLAYTON FOR TREASURER

Reset 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
4/22/10	Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106		Envelopes, stationary	\$ 75.00	<input type="checkbox"/>
5/29/10	Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106		Printing 300 posters at \$.50 ea	150.00	<input type="checkbox"/>
5/29/10	Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106		Use of fire truck for Morningside Davs Parade	150.00	<input type="checkbox"/>
5/29/10	Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106		Use of convertible for Anthon parade	150.00	<input type="checkbox"/>
5/29/10	Robert G. Knowler 4001 Old Lakeport Road Sioux City, IA 51106		6 hrs use of Calliope and Circus Truck	300.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$	
<b>TOTAL (if last page of this schedule)</b>				\$	825.00

\*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.

FOR INSTRUCTIONS, SEE BACK OF FORM

RESET

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

MIKE CLAYTON FOR TREASURER

SCHEDULE

F

(Rev. 02/08)

LOANS RECEIVED & REPAYED

CHECK THIS BOX IF AMENDING FORM

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
04/25/10	Michael Clayton 3600 Transit Ave Sioux City, Iowa 51106	He is the candidate	\$ 1000

TOTAL (PART I) \$ 1000

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$

From Schedule E - TOTAL LOANS FORGIVEN \$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1000

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