

Reset Form

DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	9194
Logged in	SW
Scanned	
Computer	
Audited	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Woodbury County Democratic Central Committee

IMPORTANT: Indicate by # type of committee you are reporting for:  4  
 ( 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) \_\_\_\_\_

**IA ETHICS & CAMPAIGN  
DISCLOSURE BOARD**  
 JAN 23 2006  
 PM 1-19-06  
 FILED

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] 712-223-1429 1/18/06  
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A Jan. 19, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate by #  2

- 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

**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.) .....\$ 979<sup>58</sup>

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)..... 10339<sup>90</sup>

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 .....\$ 11,319<sup>48</sup>

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)..... 6718<sup>80</sup>

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).....\$ 4,600<sup>68</sup>

---

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ \_\_\_\_\_

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

\*\*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

Reset Form

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)  
*Woodbury County Democratic Central Committee*

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
1/5/05	ID# CK#	Cable ONE - utility Refund Sioux City IA		\$ 7 <sup>30</sup>	<input type="checkbox"/>
1/5/05	ID# CK#	Unspecified Cash Contribution		10 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Lori Berning Anthon, IA		10 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Elizabeth Hickey Sergeant Bluff, IA		15 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Maurice Wette Sergeant Bluff, IA		20 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Frank Cosgrove Sioux City, IA		25 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Jeanette Dunbar Sioux City IA		20 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Elma Mandicino Solix, IA		5 <sup>00</sup>	<input type="checkbox"/>
1/10/05	ID# CK#	Janet Rosenbury Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
1/17/05	ID# CK#	Ken Beckley Dakota Dunes, SD		100 <sup>00</sup>	<input type="checkbox"/>
SUB-TOTAL				\$ 312 <sup>30</sup>	
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

Reset Form

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)  
*Woodbury County Democratic Central Committee*

**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
1/19/05	ID# CK#	Sally O'Donnell Sioux City, IA		\$ 100 <sup>00</sup>	<input type="checkbox"/>
2	ID# CK#	Pat Hammerstrom Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
2	ID# CK#	Q West Sioux City IA Utility Refund		457 <sup>85</sup>	<input type="checkbox"/>
1/19/05	ID# CK#	Connie Barrett Sioux City IA		12 <sup>00</sup>	<input type="checkbox"/>
2	ID# CK#	Pat Wannan Sioux City IA		12 <sup>00</sup>	<input type="checkbox"/>
2	ID# CK#	Elinor Beckman Sioux City, IA		12 <sup>00</sup>	<input type="checkbox"/>
1/19/05	ID# CK#	Noreen O'Shea Sioux City, IA		50 <sup>00</sup>	<input type="checkbox"/>
2/14/05	ID# CK#	Unspecified Cash Contribution		196	<input type="checkbox"/>
2	ID# CK#	Roseanne McNertney Sioux City IA		15 <sup>00</sup>	<input type="checkbox"/>
2	ID# CK#	Unspecified Cash Contributions		110 <sup>00</sup>	<input type="checkbox"/>
SUB-TOTAL				\$ 820 <sup>85</sup>	
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

Reset Form

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)  
*Woodbury County Democratic Central Committee*

**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
2/14/05	ID# CK#	ANNE Cowley Sioux City, IA		\$ 50 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Carolyn Goodwin Sioux City IA		25 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Douglas Swan Bronson, IA		20 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	William Buckholtz Sioux City, IA		10 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Robert Hecker Sioux City IA		25 <sup>00</sup>	<input type="checkbox"/>
	3/1/05	ID# CK#	Brad Kollors Sioux City IA		100 <sup>00</sup>
3/28/05	ID# CK#	Dave Bernstein Sioux City IA		500 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Mark Munson Salix IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Pat Mack Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	G. Thomas Farvelough Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
SUB-TOTAL				\$ 930 <sup>00</sup>	
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

Reset Form

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)  
*Woodbury County Democratic Central Committee*

**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
3/28/05	ID# CK#	Steve Hansen Sioux City IA		\$ 50 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Roger/ Anita Wendt Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Mary Lee Cox Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Pat Hammerstrom Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Mark / Janet Rosenbury Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	3/28/05	ID# CK#	Minnie Darragh Sioux City IA		50 <sup>00</sup>
3/28/05	ID# CK#	Unspecified Cash Contributions		153 <sup>00</sup>	<input type="checkbox"/>
4/12/05	ID# CK#	Thomas/Lori Marsh Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Enid Kollars Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Anne Cowley Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
SUB-TOTAL				\$ 753 <sup>00</sup>	
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

Reset Form

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)  
*Woodbury County Democratic Central Committee*

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
<i>4/12/05</i>	ID# CK#	<i>Carl / Anne James Sioux City IA</i>		<i>\$ 100<sup>00</sup></i>	<input type="checkbox"/>
<i>S</i>	ID# CK#	<i>Teresa Wolf Sioux City IA</i>		<i>50<sup>00</sup></i>	<input type="checkbox"/>
	ID# CK#	<i>Barbara Orzechowski Sioux City IA</i>		<i>50<sup>00</sup></i>	<input type="checkbox"/>
	ID# CK#	<i>David Somsy Sioux City IA</i>		<i>50<sup>00</sup></i>	<input type="checkbox"/>
	ID# CK#	<i>Jackie Smith Sioux City IA</i>		<i>50<sup>00</sup></i>	<input type="checkbox"/>
	ID# CK#	<i>Penny Fee Sioux City IA</i>		<i>50<sup>00</sup></i>	<input type="checkbox"/>
<i>4/12/05</i>	ID# CK#	<i>Al Sturgeon Sioux City IA</i>		<i>100<sup>00</sup></i>	<input type="checkbox"/>
<i>5/1/05</i>	ID# CK#	<i>Marilyn Murphy Sioux City IA</i>		<i>50<sup>00</sup></i>	<input type="checkbox"/>
<i>S</i>	ID# CK#	<i>John Lazzis Sioux City IA</i>		<i>25<sup>00</sup></i>	<input type="checkbox"/>
	ID# CK#	<i>Valentia LeBene Sioux City IA</i>		<i>50<sup>00</sup></i>	<input type="checkbox"/>
SUB-TOTAL				<i>\$ 575<sup>00</sup></i>	
TOTAL (if last page of this schedule)				<i>\$</i>	

\* 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

Reset Form

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)  
*Woodbury County Democratic Central Committee*

**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
5/1/05	ID# CK#	Pat Gill Sioux City IA		\$ 50 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Jean Logan Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	John Gray Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Helen Daly Moulton IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Dale / Carole Wassmuth Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	David / Elizabeth Noyes Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Charles Fisher Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Connie Barrett Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Chat Culver Des Moines IA		30 <sup>00</sup>	<input type="checkbox"/>
5/1/05	ID# CK#	Q-West Political Group Fargo ND Utility Refund		869 <sup>84</sup>	<input type="checkbox"/>
SUB-TOTAL				\$ 1399 <sup>84</sup>	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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

Reset Form

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)  
*Woodbury County Democratic Central Committee*

**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
6/5/05	ID# CK#	Dr. Mark Johnson Sioux City IA		\$ 50 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Mary Ann Scholdt Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# 9673 CK#	UFCW Local # 1142 Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# 9673 CK#	UFCW Local # 1142 Sioux City IA		900 <sup>00</sup>	<input type="checkbox"/>
6/7/05	ID# CK#	Frank & Chevi Cosgrove Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
7/5/05	ID# CK#	Jackie Wornstadt Sioux City IA		25 <sup>00</sup>	<input type="checkbox"/>
8/24/05	ID# CK#	Beverly Koson Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Rick Arnold Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Rick Arnold Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Abigail Coffey Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#				
SUB-TOTAL				\$ 1425 <sup>00</sup>	
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

Reset Form

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)  
*Wadbury County Democratic Central Committee*

**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/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
8/24/05	ID# CK#	David Grimesey Sioux City IA		\$ 50 <sup>00</sup>	<input type="checkbox"/>
8/24/05	ID# CK#	Rick Arnold Sioux City IA		400 <sup>00</sup>	<input type="checkbox"/>
8/24/05	ID# CK#	Joyce Schulte Creston IA		25 <sup>00</sup>	<input type="checkbox"/>
8/24/05	ID# CK#	Ritz Swan Browson IA		50 <sup>00</sup>	<input type="checkbox"/>
8/24/05	ID# CK#	5 <sup>th</sup> District Central Committee Atlantic IA		1000 <sup>00</sup>	<input type="checkbox"/>
9/21/05	ID# CK#	Martha McMin Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
}	ID# CK#	Jim / Barbara Redmond Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Steve Avery Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Steve Wornstodt Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Brad / Mary Kay Kollars Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	SUB-TOTAL				\$ 2025 <sup>00</sup>
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

Reset Form

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)  
*Woodbury County Democratic Central Committee*

**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(8), 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/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
9/21/05	ID# CK#	Roger / One Iverson Sioux City IA		\$ 100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Roger / Anita Wendt Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Thomas Fairclough Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	David Samsky Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
9/21/05	ID# CK#	James Cosgrove Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
9/24/05	ID# CK#	Al Sturgeon Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
9/24/05	ID# CK#	Penny Fee Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
9/26/05	ID# CK#	Kenneth Todd Sergeant Bluff IA		50 <sup>00</sup>	<input type="checkbox"/>
10/3/05	ID# CK#	Richard Hayes Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>
10/3/05	ID# CK#	Chris Jensen Sioux City IA		50 <sup>00</sup>	<input type="checkbox"/>

SUB-TOTAL  
\$ 650<sup>00</sup>  
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

Reset Form

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)  
*Woodbury County Democratic Central Comm. Hse*

**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
10/13/05	ID# CK#	Dennis McElwain Sioux City, IA		\$ 100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Pet G. II Sioux City, IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Maurice Welte Sergeant Bluff, IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Calende Den Harder Sioux City, IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Wes Whitehead Sioux City, IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Madonne Nitzke Sioux City, IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Claryce Evans Sioux City, IA		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Enid Hollars Sioux City, IA		50 <sup>00</sup>	<input type="checkbox"/>
10/17/05	ID# CK#	Al Sturgeon Sioux City		100 <sup>00</sup>	<input type="checkbox"/>
4	ID# CK#	Kevin Beauvais Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
SUB-TOTAL				\$ 850 <sup>00</sup>	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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

Reset Form

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)  
*Woodbury County Democratic Central Committee*

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
10/17/05	ID# CK#	Terese Wolff Sioux City IA		\$ 50 <sup>00</sup>	<input type="checkbox"/>
10/17/05	ID# CK#	Unspecified Cash Contribution		100 <sup>00</sup>	<input type="checkbox"/>
10/20/05	ID# CK#	Unspecified Cash Contribution		86 <sup>75</sup>	<input type="checkbox"/>
11/4/05	ID# CK#	Unspecified Cash Contribution		77 <sup>26</sup>	<input type="checkbox"/>
11/4/05	ID# CK#	Unspecified Cash Contribution		59 <sup>55</sup>	<input type="checkbox"/>
11/18/05	ID# CK#	Unspecified Cash Contribution		50 <sup>40</sup>	<input type="checkbox"/>
11/25/05	ID# CK#	Unspecified Cash Contribution		42 <sup>45</sup>	<input type="checkbox"/>
12/20/05	ID# CK#	Jenson for City Council Committee - Close-out		34 <sup>54</sup>	<input type="checkbox"/>
12/20/05	ID# CK#	Tim / Peule Clausen Sioux City IA		100 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL  
 \$ 598<sup>95</sup>  
**TOTAL (if last page of this schedule)**  
 \$ 10339<sup>90</sup>

\* 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

Reset 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)  
*Woodbury County Democratic Central Committee*

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
1/3/05	ID# CK#	Dennis Lee Sioux City, IA	HQ Volunteer expense	\$ 108 <sup>00</sup>
L	ID# CK#	Jeramey Boddy Sioux City, IA	HQ Volunteer expense	75 <sup>00</sup>
1/5/05	ID# CK#	City of Sioux City Sioux City, IA	Utility Expense (water/sewer)	12 <sup>67</sup>
L	ID# CK#	Mid-American Energy Sioux City, IA	Ut. lity Expense HQ Gas & Electric	456 <sup>99</sup>
L	ID# CK#	US Post office Sioux City, IA	Box Rental Annual fee	38 <sup>00</sup>
1/5/05	ID# CK#	Waste Management Sioux City, IA	Garbage Collection	26 <sup>04</sup>
1/10/05	ID# CK#	Pay Pal Omaha NE	Service Fee Contribution	3 <sup>20</sup>
L	ID# CK#	Pay Pal Omaha NE	Service Fee Contribution	3 <sup>20</sup>
SUB-TOTAL				\$ 722 <sup>60</sup>
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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset 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)  
*Woodbury County Democratic Central Committee*

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
1/18/05	ID# CK#	Mail House Sioux City IA	Postage & Mailing Service Political Ad	\$ 169 <sup>06</sup>
2	ID# CK#	Terese Wolf Sioux City IA	Reimbursement - HO office supplies, copying & printing	387 <sup>41</sup>
1/19/05	ID# CK#	Mid-American Energy - Sioux City IA	Utility Expense Gas & Electric	327 <sup>39</sup>
1/19/05	ID# CK#	City of Sioux City Sioux City, IA	Utility Expense Water & Sewer	12 <sup>06</sup>
1/24/05	ID# CK#	Terese Wolf Sioux City IA	Reimbursement youth activity	36 <sup>00</sup>
2/14/05	ID# CK#	Mid-American Energy Sioux City IA	UTILITY Expense Gas & Electric	451 <sup>09</sup>
(	ID# CK#	Waste Management Sioux City IA	Trash Pick-up Service	40 <sup>22</sup>
)	ID# CK#	City of Sioux City Sioux City IA	Utility Expense HO Water/Sewer	12 <sup>06</sup>
SUB-TOTAL				\$ 1435 <sup>29</sup>
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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

**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)  
*Woodbury County Democratic Central Committee*

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
3/1/05	ID# CK#	Deluxe Business Checks via Pioneer Bank	Business Checks	\$ 35 <sup>99</sup>
3/10/05	ID# CK#	Pioneer Bank Sioux City IA	Service Charge	8 <sup>72</sup>
3/28/05	ID# CK#	Mid-American Energy Sioux City IA	Utility Service Gas & Electric	176 <sup>94</sup>
3/28/05	ID# CK#	City of Sioux City Sioux City IA	Utility Service Water & Sewer	223 <sup>39</sup>
3/28/05	ID# CK#	Teresa Wolf Sioux City IA	Central Committee Office Supplies, Copies & Postage Reimbursement	60 <sup>81</sup>
4/12/05	ID# CK#	Waste Management Sioux City IA	Trash Pickups	40 <sup>83</sup>
5/1/05	ID# CK#	Woodbury County Fair Board Mobile IA	Woodbury County Fair booth Rental	150 <sup>00</sup>
5/1/05	ID# CK#	Teresa Wolf Sioux City IA	Reimbursement - Political Ad - Journal Central Committee Postage	26 <sup>19</sup>
SUB-TOTAL				\$ 742 <sup>87</sup>
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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

**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)  
*Woodbury County Democratic Central Committee*

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
6/5/08	ID# CK#	Kevin Beavers Sioux City IA	Reimbursement Copying Expense & Postage	\$ 22 <sup>38</sup>
8/25/05	ID# CK#	Explorer's Baseball Sioux City IA	Central Committee Volunteer Recognition	453 <sup>00</sup>
8/25/05	ID# CK#	Holly Shoppe Sioux City, IA	Floral Arrangements Prog Dinner	187 <sup>50</sup>
8/25/05	ID# CK#	5th District Demo Central Committee Atlantic IA	Contribution to 5th District Comm.	1000 <sup>00</sup>
8/25/05	ID# CK#	Terese Wolf Sioux City, IA	Reimbursements: Central Committee office supplies & Postage & Printing Exp	335 <sup>76</sup>
8/25/05	ID# CK#	Kinko's Sioux City IA	Printing Expense Volunteer Recognition	70 <sup>06</sup>
8/25/05	ID# CK#	Mail House Sioux City IA	Meeting Services & Postage	128 <sup>43</sup>
8/25/05	ID# CK#	Kevin Beavers Sioux City, IA	Reimbursement: Copy expenses & Postage	29 <sup>32</sup>
SUB-TOTAL				\$ 2226 <sup>45</sup>
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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

**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)  
*Woodbury County Democratic Central Committee*

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
9/23/05	ID# CK#	Kinko's Sioux City, IA	Copying expenses Central Comm & Hughes	\$ 99 <sup>96</sup>
9/23/05	ID# CK#	Arthur Gallagher's Sioux City IA	Liability Ins. Central Comm.	250 <sup>00</sup>
9/23/05	ID# CK#	Terese Wolf Sioux City IA	Reimbursement: Copy Exp, Training Exp, Supplies	388 <sup>94</sup>
9/23/05	ID# CK#	Kevin Bedewes Sioux City IA	Copying Expense Reimbursement	11 <sup>61</sup>
9/23/05	ID# CK#	Mail House Sioux City IA	Mailing Service & Postage	143 <sup>33</sup>
10/3/05	ID# CK#	Terese Wolf Sioux City IA	Reimbursement: Prog Dinner Supplies Printing	370 <sup>65</sup>
10/17/05	ID# CK#	Pioneer Bank Sioux City IA	Bank Service Charge	13 <sup>70</sup>
11/2/05	ID# CK#	Kinko's Sioux City IA	Printing Expense Prog Dinner & Central Comm	61 <sup>05</sup>
SUB-TOTAL				\$ 1339 <sup>24</sup>
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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

**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)  
*Woodbury County Democratic Central Committee*

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
12/19/05	ID# CK#	Powell Marketing Sioux City, IA	office Supplies BANNER	\$ 120 <sup>00</sup>
12/19/05	ID# CK#	Teresa Wolf Sioux City, IA	Reimbursement Central Comm Printing & Postage	86 <sup>95</sup>
12/19/05	ID# CK#	Kevin Beavers Sioux City, IA	Reimbursement Postage	7 <sup>40</sup>
12/19/05	ID# CK#	US Post Office Box Rental	Annual Post Office Box Rental	38 <sup>00</sup>
	ID# CK#			

SUB-TOTAL \$ 252<sup>35</sup>  
 TOTAL (if last page of this schedule) \$ 6718<sup>80</sup>

**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).)