

FOR INSTRUCTIONS SEE BACK OF FORM



DISCLOSURE SUMMARY PAGE

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 610 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

COMMITTEE FOR PASSAGE OF BELMOND-KJ.EMME BOND REFERENDUM

IMPORTANT Indicate by # type of committee you are reporting for 11

(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 (8)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) _____

RECEIVED

SEP 21 2006

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.

Russell A. Talbot (641) 444-4269 09-21-06
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING AN (1) ELECTION YEAR--September 21, 2006 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
September 26, 2006

County & Local Committees, enter County in which Election is held
Wright, Hancock, & Franklin

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>1,731 24</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) ("also see In-kind below")	\$	<u>5,584 52</u>
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	\$	<u>7,315 76</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below")	\$	<u>5,952 73</u>
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)	\$	<u>1,363 03</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	_____
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>314 60</u>
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)
 COMMITTEE FOR PASSAGE OF BELMOND KLEMME BOND REFER

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 88B.32A(8), 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
03 05 06	ID# CK#	TENOLD CHIROPRACTIC CLINIC 406 River Avenue North Belmond, IA 50421 1039		\$ 200.00	<input type="checkbox"/>
03 08 06	ID# CK#	CURTIS STADTLANDER 1730 150TH Street Goodell, IA 50439		50.00	<input type="checkbox"/>
03 08 06	ID# CK#	LAVON M TANNER 1116 Windsor Place Belmond, IA 50421		25.00	<input type="checkbox"/>
03 08 06	ID# CK#	SHERRY WAGNER 216 6TH Avenue NW Belmond, IA 50421		10.00	<input type="checkbox"/>
03 13 06	ID# CK#	RICK KINSETH 1343 Schmale Circle Belmond, IA 50421		200.00	<input type="checkbox"/>
03 13 06	ID# CK#	GARY L BERKLAND 304 4TH Avenue NW Belmond, IA 50421		100.00	<input type="checkbox"/>
03 13 06	ID# CK#	RODNEY A MEINTS 2974 140TH Street Belmond, IA 50421		50.00	<input type="checkbox"/>
03 13 06	ID# CK#	LAVON M TANNER 1116 Windsor Place Belmond, IA 50421		20.00	<input type="checkbox"/>
03 14 06	ID# CK#	WE 3 CATERING COMPANY 231 East Main Street Belmond, IA 50421		500.00	<input type="checkbox"/>
03 14 06	ID# CK#	KIMBERLY A MASON 412 Second Street SW Belmond, IA 50421		135.13	<input type="checkbox"/>
SUB-TOTAL				\$1,290.13	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



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)
 COMMITTEE FOR PASSAGE OF BELMOND KLEMMER BOND REFER

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08 18 06	ID# CK#	MARCIA KETCHUM 207 6TH Avenue NW Belmond, IA 50421		\$ 50 00	<input type="checkbox"/>
08 20 06	ID# CK#	ROONEY A MCINTS 2974 140TH Street Belmond, IA 50421		300 00	<input type="checkbox"/>
08 23 06	ID# CK#	BRADLEY W ROBSON 1012 Windsor Place Belmond, IA 50421		100 00	<input type="checkbox"/>
08 27 06	ID# CK#	DAVID J SEXTRO 907 First Street SE Belmond, IA 50421		200.00	<input type="checkbox"/>
08 27 06	ID# CK#	DIANE STADTLANDER 1730 150TH Street Goodell, IA 50439		100.00	<input type="checkbox"/>
08 28 06	ID# CK#	Laurie A BEEN 1571 Tyrrell Lane Belmond, IA 50421		100.00	<input type="checkbox"/>
08 29 06	ID# CK#	ROCHELLE L TRIGGS 904 First Street SE Belmond, IA 50421		50 00	<input type="checkbox"/>
08 30 06	ID# CK#	LANETTE K. MAYBERRY 102 6TH Avenue SW Belmond, IA 50421		100.00	<input type="checkbox"/>
09 05 06	ID# CK#	DIANE K SANDMAN 1518 Tyrrell Lane Belmond, IA 50421		50.00	<input type="checkbox"/>
09 05 06	ID# CK#	FONDA THOMPSEN 1530 Taylor Avenue Belmond, IA 50421		50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 1,100 00

TOTAL (if last page of this schedule)

\$

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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)
COMMITTEE FOR PASSAGE OF BELMONT KLEMMER BOND REFER

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09-05-06	ID# CK#	WE 3 CATERING COMPANY 231 East Main Street Belmond, IA 50421		\$ 200.00	<input type="checkbox"/>
09-07-06	ID# CK#	GEORGE S HINMAN 811 8TH Avenue NE Belmond, IA 50421		100.00	<input type="checkbox"/>
09-08-06	ID# CK#	KINSETH PLUMBING & HEATING 148 East Main Street Belmond, IA 50421		250.00	<input type="checkbox"/>
09-08-06	ID# CK#	MARK J JENISON 315 7TH Avenue SE Belmond, IA 50421		100.00	<input type="checkbox"/>
09-08-06	ID# CK#	TOM STADTLANDER 1442 Third Avenue SW Ext Belmond, IA 50421		100.00	<input type="checkbox"/>
09-08-06	ID# CK#	MARCIA J. BURT 2270 Victor Avenue Rowan, IA 50470		25.00	<input type="checkbox"/>
09-08-06	ID# CK#	JODI L FENTICO 412 2ND Avenue NE Belmond, IA 50421-1135		25.00	<input type="checkbox"/>
09-08-06	ID# CK#	PAULA J JENISON 408 West Main Street Belmond, IA 50421		20.00	<input type="checkbox"/>
09-08-06	ID# CK#	AUSTIN MEINTS 2974 140TH Street Belmond, IA 50421		20.00	<input type="checkbox"/>
09-08-06	ID# CK#	NICHOLAS MEINTS 2974 140TH Street Belmond, IA 50421		20.00	<input type="checkbox"/>

SUB-TOTAL

\$ 860.00

TOTAL (if last page of this schedule)

\$

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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)
 COMMITTEE FOR PASSAGE OF BELMOND KLEMME BOND REFER

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.

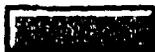
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09-08-06	ID# CK#	TAYLOR MEINTS 2974 140TH Street Belmond, IA 50421		\$ 20.00	<input type="checkbox"/>
09-08-06	ID# CK#	PENNY PEDERSON 1020 Grove Avenue, Apt 3 Garner, IA 50438		20.00	<input type="checkbox"/>
09-08-06	ID# CK#	TERESA WESTER 120 South 2ND Street Klemme, IA 50449		20.00	<input type="checkbox"/>
09-08-06	ID# CK#	JOLEEN M SMITH 1892 Taylor Avenue Belmond, IA 50421-7572		15.00	<input type="checkbox"/>
09-08-06	ID# CK#	JAMES MEYER 904 8TH Avenue NE Belmond, IA 50421		10.00	<input type="checkbox"/>
09-08-06	ID# CK#	JUANITA STROMER 1860 Highway 69 Klemme, IA 50449		10.00	<input type="checkbox"/>
09-08-06	ID# CK#	LAVON TANNER 1116 Windsor Place Belmond, IA 50421		10.00	<input type="checkbox"/>
09-09-06	ID# CK#	MARY KRANZ 308 South 3RD Street Klemme, IA 50449		20.00	<input type="checkbox"/>
09-10-06	ID# CK#	LISA A MEINTS 2974 140TH Street Belmond, IA 50421		25.00	<input type="checkbox"/>
09-11-06	ID# CK#	KAREN L KUSIAN 907 8TH Avenue NE Belmond, IA 50421		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 350.00	
TOTAL (if last page of this schedule)				\$	

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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)
 COMMITTEE FOR PASSAGE OF BELMOND KLEMMÉ BOND REFER

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09 11 06	ID# CK#	STEPHEN W MCCLINTOCK 1577 Tyrrell Lane Belmond, IA 50421		\$ 150.00	<input type="checkbox"/>
09 11 06	ID# CK#	BLEDENKE PHARMACY, LIMITED 443 East Main Belmond, IA 50421		100.00	<input type="checkbox"/>
09 11 06	ID# CK#	THOMAS R H BROOKS 2711 130TH Street Belmond, IA 50421		100.00	<input type="checkbox"/>
09 11 06	ID# CK#	DARWIN D CHRISTENSEN 216 Third Avenue NE Belmond, IA 50421		100.00	<input type="checkbox"/>
09 11 06	ID# CK#	NORTHWEST FEDERAL SAVINGS 101 West 5TH Street, P O Box 80 Spencer, IA 51301 0080		100.00	<input type="checkbox"/>
09 11 06	ID# CK#	EUGENE PALS 3070 110TH Street Belmond, IA 50421		100.00	<input type="checkbox"/>
09 11 06	ID# CK#	REX A BOYD HOME STAR WINDOWS 2828 130TH Street Belmond, IA 50421		25.39	<input type="checkbox"/>
09 11 06	ID# CK#	CRYSTAL BRANER 1415 Fairway Drive Belmond, IA 50421		25.00	<input type="checkbox"/>
09 11 06	ID# CK#	DONA L. CLEVELAND 1537 Tyrrell Lane Belmond, IA 50421		25.00	<input type="checkbox"/>
09 11 06	ID# CK#	ROGER FEKKERS 412 10TH Avenue NE Belmond, IA 50421		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 750.39	
TOTAL (if last page of this schedule)				\$	

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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)
COMMITTEE FOR PASSAGE OF BELMOND KLEMM BUND REFER

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09 11 06	ID# CK#	CLAUDE W POST 908 8TH Street NE Belmond, IA 50421 1620		\$ 25.00	<input type="checkbox"/>
09 11 06	ID# CK#	DAREN MENNENGA 1280 Washington Avenue Belmond, IA 50421		10.00	<input type="checkbox"/>
09 12 06	ID# CK#	DAVID L LIEBERKNECHT 123 Montclare Lane Belmond, IA 50421		100.00	<input type="checkbox"/>
09 12 06	ID# CK#	DUWAYNE W ABEL 1103 River Avenue South Belmond, IA 50421		25.00	<input type="checkbox"/>
09 12 06	ID# CK#	KEVIN BRUNES 403 East Morningside Drive Klemme, IA 50449		25.00	<input type="checkbox"/>
09 12 06	ID# CK#	ELDORIS BUNNELL 1103 Third Street NE Belmond, IA 50421		25.00	<input type="checkbox"/>
09 12 06	ID# CK#	BETTE A. OLSON 915 8TH Street NE Belmond, IA 50421 1619		25.00	<input type="checkbox"/>
09 12 06	ID# CK#	VERONICA R. BENETTI 816 5TH Avenue NE Belmond, IA 50421		20.00	<input type="checkbox"/>
09 12 06	ID# CK#	JAN MEINTS 215 Country Club Drive, Apt. J Belmond, IA 50421		20.00	<input type="checkbox"/>
09 12 06	ID# CK#	RITA M REDDER 1016 Third Street NE Belmond, IA 50421		20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 295.00	
TOTAL (if last page of this schedule)				\$	

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE FOR PASSAGE OF BELMOND-KLEMMER BOND REFER

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09-12-06	ID# CK#	RUTH JOHNSON 2230 130TH Street Belmond, IA 50421		\$ 7.00	<input type="checkbox"/>
09-13-06	ID# CK#	CHRISTINE L MALLEN 904 5TH Avenue NE Belmond, IA 50421		20.00	<input type="checkbox"/>
09-13-06	ID# CK#	MARILYN K. JANSSEN 803 9TH Avenue NE Belmond, IA 50421-1635		10.00	<input type="checkbox"/>
09-13-06	ID# CK#	TONISHIA PALS 416 4TH Avenue NE Belmond, IA 50421		10.00	<input type="checkbox"/>
09-13-06	ID# CK#	KENDRA MACKAY 315 East G Street Forest City, IA 50436		5.00	<input type="checkbox"/>
09-14-06	ID# CK#	BETTY C. AND JAMES E. HOUSER 507 2ND Street NE Belmond, IA 50421		50.00	<input type="checkbox"/>
09-14-06	ID# CK#	WANDA TORKELSON 2855 Taff Avenue Garner, IA 50438		40.00	<input type="checkbox"/>
09-14-06	ID# CK#	AMY L POLLITT 1112 Windsor Place Belmond, IA 50421		22.00	<input type="checkbox"/>
09-14-06	ID# CK#	LYNNETTE BAILEY CLARK 811 10TH Avenue NE Belmond, IA 50421		20.00	<input type="checkbox"/>
09-14-06	ID# CK#	AVIS B HOWELL 216 Third Avenue SE Belmond, IA 50421-1218		20.00	<input type="checkbox"/>

SUB-TOTAL
\$ 204.00

TOTAL (if last page of this schedule)
\$

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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)
COMMITTEE FOR PASSAGE OF BELMOND KLEMMER BOND REFER

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09 14 06	ID# CK#	DONNA M KOPRIVA 304 Fairway Drive Belmond, IA 50421		\$ 20.00	<input type="checkbox"/>
09 14 06	ID# CK#	MARNE MARKWARDT 113 North 15TH Street Clear Lake, IA 50426		15.00	<input type="checkbox"/>
09 15 06	ID# CK#	LORA L & RUSSELL G TALBOT 216 Third Avenue SE Belmond, IA 50421 1218		50.00	<input type="checkbox"/>
09 16 06	ID# CK#	KIRK UHLENHOPP 804 5TH Avenue NE Belmond, IA 50421 1440		250.00	<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 \$ 335.00

TOTAL (If last page of this schedule) \$ 5,584.52

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FOR INSTRUCTIONS, SEE BACK OF FORM

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)
COMMITTEE FOR PASSAGE OF BELMONT KLEMMÉ BOND REFERENDUM

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
03 10 06	ID# CK# 0062	THE GLOBE GAZETTE 300 North Washington Ave Mason City, IA 50401	Advertisements- 03-12, 13, & 14	\$ 666.00
03 10 06	ID# CK# 0063	PACKARD ELECTRIC, INC. 1003 River Avenue South Belmond, IA 50421	Reimbursement for Supplies--Toner	96.29
03 10 06	ID# CK# 0064	RODNEY A MEINTS 2974 140TH Street Belmond, IA 50421	Reimbursement for Pay- ment to Iowa Secretary of State--Voter Information	49.90
04 03 06	ID# CK# 0065	BELMONT INDEPENDENT 215 East Main Street Belmond, IA 50421	Local Advertising - With Color 03 09 06 Issue of Independent	594.32
04 03 06	ID# CK# 0066	[Same as above]	Supplies	25.68
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,432.19
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:
 Purchase 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)(j).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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)
 COMMITTEE FOR PASSAGE OF BELMONT-KLEMMER BOND REFERENDUM

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
04 07 06	ID# CK# 0067	PRINTING SERVICES, INC 524 River Avenue North Belmond, IA 50421	Sheetfed Printing - Bond Issue Flier 5,000	\$ 335.49
04 07 06	ID# CK# 0068	[Same as above]	Insertion--Reminder 02 23 06 The Need, The Cost	314.93
04 07 06	ID# CK# 0069	[Same as above]	Sheet Fed Printing -- Voter Sheets 5,000	264.79
04 07 06	ID# CK# 0070	[Same as above]	Insertion--Reminder 03 02 06 Voters of the Belmond-Klemme School Dist	314.93
04 10 06	ID# CK# 0071	UNITED STATES POSTAL SERV 218 First Street NE Belmond, IA 50421	Postage Stamps 60 @ 39	23.40
05 03 06	ID# CK# 0072	PRINTING SERVICES, INC 524 River Avenue North Belmond, IA 50421	Advertising & Spot Color-- Reminder 03 09 06 Support the Bond	433.60
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,687.14
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)(l).)

FOR INSTRUCTIONS, SEE BACK OF FORM



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)
 COMMITTEE FOR PASSAGE OF BELMONT KLEMMER BOND REFERENDUM

DATE EXPENDED (MM/DD/YYR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
08 20 06	ID# CK# 0073	RODNEY A MEINTS 2974 140TH Street Belmond, IA 50421	Reimbursement for Payment to Wright County Auditor -- Absentee Ballot List	\$ 20 00
09 05 06	ID# CK# 0074	PRINTING SERVICES, INC 524 River Avenue North Belmond, IA 50421	Sheetfed Printing -- Bond Issue Flier For: 08-24-06 Reminder	328 33
09 05 06	ID# CK# 0075	[Same as above]	Sheetfed Printing -- Key Points to Remember & Coupon Sale, For: 08-31-06 Reminder	355.08
09 05 06	ID# CK# 0076	BELMONT INDEPENDENT 215 East Main Street Belmond, IA 50421	Local Advertising 08-24-06 Bond Issues 08-31-06 #20 Guarantee	333 00
09 12 06	ID# CK# 0077	PRINTING SERVICES, INC 524 River Avenue North Belmond, IA 50421	Insertion -- Reminder 08-31-06 Key Points to Remember & Coupon Sale	314 60
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,351.01
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 88A 402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE **B**
(Rev. 07/03) MONETARY EXPENDITURES

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.

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE FOR PASSAGE OF BELMUND KLEMMER BOND REFERENDUM

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 15 06	ID# CK# 0078	BELMUND INDEPENDENT 215 East Main Street Belmond, IA 50421	Local Advertising - 09 07 Breaking News & Key Points and 09 14 Protect Your Future	\$ 417.00
09 15 06	ID# CK# 0079	PRINTING SERVICES, INC 524 River Avenue North Belmond, IA 50421	Offset Printing -- Key Points to Remember WEEK # 2 For: 09 07 06 Reminder	245.95
09 15 06	ID# CK# 0080	[Same as above]	Insertion -- Reminder 09 07 06 Key Points to Remember WEEK # 2	314.60
09 15 06	ID# CK# 0081	[Same as above]	Offset Printing -- Key Points to Remember WEEK # 3 & Believe it, or not" 09 14 06	238.04
09 15 06	ID# CK# 0082	[Same as above]	Insertion -- Reminder 09 14 06 Key Points WEEK # 3 & "Believe it, or not"	266.20
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,482.39
TOTAL (If last page of this schedule)				\$ 5,952.73

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).)

