

Reset Form

**DISCLOSURE SUMMARY PAGE**

<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1636
Logged In	SW ce
Scanned	
Computer	
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

Lynne Gentry for Iowa House

**IMPORTANT:** Indicate by # type of committee you are reporting for:  1  
 ( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
 ( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) County Candidate ( 7 ) School Board or Other  
 Political Subdivision Candidate ( 8 ) County PAC ( 9 ) School Board or Other Political  
 Subdivision PAC ( 11 ) Local Ethics and Campaign Disclosure Board

**CANDIDATE COMMITTEES ONLY**

Candidate Name: Lynne Gentry  
 Office Sought: State Representative

Political Party (if applicable): Democratic  
 District (if Senate or House): 50

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD  
 JUL 19 2006  
 FILED pm 7:18

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.

Linda A. Green (712) 297-5070 7/17/06  
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A May 15, 2006 - July 14, 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 \_\_\_\_\_

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.) .....	\$ 3,492.83
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) .....	2,795.00
Schedule F: Loans Received total (Attach Schedule F) .....	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....	0.00
<b>(Schedule H applies to Candidates' Committees Only)</b>	
<b>SUB-TOTAL</b> .....	<b>\$ 6,287.83</b>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) .....	1,274.70
Schedule F: Loan Repayments total (Attach Schedule F) .....	0.00
<b>CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)</b> .....	<b>\$ 5,013.13</b>
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D) .....	<b>\$ 0.00</b>
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	<b>\$ 0.00</b>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F) .....	<b>\$ 0.00</b>
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?) _____	YES <input checked="" type="checkbox"/> NO
<b>CANDIDATE COMMITTEES ONLY:</b>	
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H) _____	<b>\$ 0.00</b>

**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)**  
Lynne Gentry for Iowa House

**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
05/19/06	ID# CK#	Kathaleen Hiler 2102 290th Street Rockwell City, IA 50579		\$25.00	<input type="checkbox"/>
05/19/06	ID# CK#	Matthew R Patton 1202 N West Street Mount Ayr, IA 50854		50.00	<input type="checkbox"/>
05/19/06	ID# CK#	B J Gregg 745 Famham Avenue PO Box 73		25.00	<input type="checkbox"/>
05/19/06	ID# CK#	Irene Van Patten 435 Niebel PO Box 42		25.00	<input type="checkbox"/>
05/19/06	ID# 6086 CK# 2391	Iowa Committee on Political Education, AFL-CIO 2000 Walker, Suite A Des Moines, IA 50317		150.00	<input type="checkbox"/>
05/22/06	ID# CK#	Robert H Miller 701 Tally Ho Court Clayton, CA 94517		50.00	<input type="checkbox"/>
05/24/06	ID# CK#	Sharon Carey 107 Fitzpatrick Street Box 215		25.00	<input type="checkbox"/>
06/12/06	ID# CK#	Helen N Miller 1936 15th Avenue N Fort Dodge, IA 50501		25.00	<input type="checkbox"/>
06/26/06	ID# 1636 CK# 13453	ISEA PAC 777 3rd Street Des Moines, IA 50309		100.00	<input type="checkbox"/>
06/28/06	ID# CK#	Patricia Kevlin 206 Ash Street Lohrville, IA 51453		20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 495.00	
<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

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**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Lynne Gentry for Iowa House

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07/01/06	ID# CK#	Jerry K Green 2087 235th Street Rockwell City, IA 50579		\$100.00	<input checked="" type="checkbox"/>
07/03/06	ID# CK#	Eleanor F Anderson 1408 Union Street Gowrie, IA 50543	aunt	100.00	<input checked="" type="checkbox"/>
07/03/06	ID# CK#	Jane Henely 524 Madison Lake City, IA 51449		25.00	<input checked="" type="checkbox"/>
07/03/06	ID# CK#	Greta Anderson 213 Plum Street North Northfield, MN 55057		25.00	<input checked="" type="checkbox"/>
07/03/06	ID# CK#	Francis Tasler 106 North Oak Street Jefferson, IA 50129		20.00	<input checked="" type="checkbox"/>
07/08/06	ID# CK#	Nicole Friess-Schilling 1032 215th Street Jefferson, IA 50129		25.00	<input checked="" type="checkbox"/>
07/08/06	ID# CK#	Donna Lawson 1214 Southfield Drive Jefferson, IA 50129		25.00	<input checked="" type="checkbox"/>
07/08/06	ID# CK#	Deborah Wills 507 S Oak Jefferson, IA 50129		25.00	<input checked="" type="checkbox"/>
07/08/06	ID# CK#	Connie Haluska 1303 Westwood Drive Jefferson, IA 50129		25.00	<input checked="" type="checkbox"/>
07/08/06	ID# CK#	Stanley Rosenthal 10864 Kingston Huntington Woods, MN 48070		50.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 420.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)**  
Lynne Gentry for Iowa House

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07/08/06	ID# CK#	Myra Kail PO Box 273 Gilmore City, IA 50541	sister-in-law	\$200.00	<input checked="" type="checkbox"/>
07/08/06	ID# CK#	Marty Minnick 413 Austin Street Rockwell City, IA 50579		100.00	<input checked="" type="checkbox"/>
07/08/06	ID# CK#	Phyllis Caldwell Box 52 Lohrville, IA 51453		50.00	<input checked="" type="checkbox"/>
07/08/06	ID# CK#	Larry Most 220 N Wilson Jefferson, IA 50129		50.00	<input checked="" type="checkbox"/>
07/14/06	ID# CK#	Gregg Heidi 1948 170th Street Pomeroy, IA 50575		75.00	<input checked="" type="checkbox"/>
07/14/06	ID# 1636 CK# 1168	Iowa Laborers PAC Fund 5806 Meredith Drive, Suite B Des Moines, IA 50322		150.00	<input type="checkbox"/>
07/14/06	ID# 6085 CK# 825	Iowa State Building & Construction Trades Council PEC 110 10th Avenue NW		500.00	<input type="checkbox"/>
07/14/06	ID# 6089 CK# 347	Operating Engineers Local 234 Political Fund 4880 Hubbell Des Moines, IA 50317		500.00	<input type="checkbox"/>
07/14/06	ID# CK#	Carol John 1232 245th Street Jefferson, IA 50129		25.00	<input checked="" type="checkbox"/>
07/14/06	ID# CK#	Lawrence Geisler 783 J Avenue Jefferson, IA 50129		20.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1670.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)**  
Lynne Gentry for Iowa House

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07/14/06	ID# CK#	Deanne Grantham 314 E Adams Lake City, IA 51449		\$10.00	<input checked="" type="checkbox"/>
07/14/06	ID# CK#	Shelly Gentry 3014 SW Prairieview Road Ankeny, IA 50021	daughter-in-law	200.00	<input checked="" 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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 210.00

TOTAL (if last page of this schedule)

\$ 2795.00

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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)  
Lynne Gentry for Iowa House

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
05/17/06	ID# CK#	Duckwall's Variety Store 423 4th Street Rockwell City, IA 50579	paper and other office supplies for campaign treasurer	\$ 13.41
05/18/06	ID# CK#	Linda Green 2087 235th Street Rockwell City, IA 50579	reimbursement for postage for schedule report	5.12
05/30/06	ID# CK#	Steve's Sign Shop 217 4th Street Rockwell City, IA 50579	pair of magnetic signs for car for parades	95.40
06/26/06	ID# CK#	Postmaster 520 4th Street Rockwell City, IA 50579	stamps	109.20
06/26/06	ID# CK#	Duckwall's Variety Store 423 4th Street Rockwell City, IA 50579	envelopes, address labels	10.03
07/05/06	ID# CK#	Carter Printing 1739 East Grand Des Moines, IA 50316	yard signs	901.00
07/06/06	ID# CK#	Postmaster 520 4th Street Rockwell City, IA 50579	stamps	78.00
07/11/06	ID# CK#	Party Productions 1919 1st Avenue North Fort Dodge, IA 50501	parade candy, fund raiser tableware	62.54
SUB-TOTAL				\$ 1274.70
<b>TOTAL (if last page of this schedule)</b>				\$ 1274.70

**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

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SCHEDULE <b>F</b> (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
Lynne Gentry for Iowa House

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0.00

**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
	None		\$ 0.00

TOTAL (PART I) \$ 0.00

**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 REPAID
	None		\$ 0.00

TOTAL CASH REPAYMENTS (PART II) \$ 0.00  
 From Schedule E -- TOTAL LOANS FORGIVEN \$ 0.00  
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0.00

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Reset Form

SCHEDULE <b>G</b> (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)

Lynne Gentry for Iowa House

**PART I - NAME AND ADDRESS OF CONSULTANT**

<b>Name of Consultant</b>		
None		
<b>Mailing Address</b>		
<b>City</b>	<b>State</b>	<b>Zip Code</b>

<b>CONTRACT PERIOD (MM/DD/YR)</b>	<b>TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE</b>
From _____	\$ _____
To _____	

**ESTIMATES OF PERFORMANCE**


**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.)

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

<b>SUB-TOTAL</b>	\$
<b>TOTAL</b> (If last page of this schedule)	\$

**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

SCHEDULE  
**H**  
(Rev. 07/03) CAMPAIGN  
PROPERTY

COMMITTEE NAME (Must be same as on Statement of Organization)  
Lynne Gentry for Iowa House

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ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.

CHECK THIS BOX IF AMENDING FORM

**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

**PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY \*\***

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
	None		0.00

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation
	None			0.00	0.00

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ \_\_\_\_\_

\*\* PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ \_\_\_\_\_ TOTALS \$ 0.00 \$ 0.00

\* If estimated, show **est.** beside figure.

(Attach Additional Schedules if Needed)