

DISCLOSURE SUMMARY PAGE



FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	SW 1629
Logged in	SW 2
Scanned	
Computer	
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

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) 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: *Tim Morgan* Political Party (if applicable): *Republican*
 Office Sought: *Iowa Senate HD 21* District (if Senate or House): *21*

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.

Tim Morgan SIGNATURE OF PERSON FILING REPORT 644-792-0461 TELEPHONE 5-18-06 DATE SIGNED

I AM FILING A May 19, 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.)	\$	<u>0</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		<u>10,235.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>10,235.00</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>6095.79</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>4139.21</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>1055.22</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>836.76</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO	
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0</u>

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

For Instructions, See Back of Form

Reset 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)
Friends of Tim Morgan

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
4-19-06	ID# CK#	Jane E. McDaniel 1210 S. 15 ave W Newton, IA 50208		\$ 25 ⁰⁰	<input type="checkbox"/>
4-18-06	ID# CK#	P.A. & D.M. Bleeker 801 E 18th N Newton, IA 50208		20 ⁰⁰	<input type="checkbox"/>
4-18-06	ID# CK#	Avery Wilson 512 E 17th N Newton, IA 50208		52 ⁰⁰	<input type="checkbox"/>
4-18-06	ID# CK#	Roy A. & Irene A. Moore 6428th 29 Ave E, Newton IA 50208		25 ⁰⁰	<input type="checkbox"/>
4-17-06	ID# CK#	David L. Twedt 612 S. 5 ave W Newton, IA 50208		52 ⁰⁰	<input type="checkbox"/>
4-24-06	ID# CK#	Edith J. Terlow 6916 Hwy T22 S Sully, IA 50251		26 ⁰⁰	<input type="checkbox"/>
4-24-06	ID# CK#	Earl L. Johnson 1109 S. 13 ave W Newton IA 50208		125 ⁰⁰	<input type="checkbox"/>
4-24-06	ID# CK#	MARY Sellers P.O. Box 591 MONROE, IA 50170		50 ⁰⁰	<input type="checkbox"/>
4-22-06	ID# CK#	S. Robert Payne 500 1st St. N APT 110 Newton, IA 50208		100 ⁰⁰	<input type="checkbox"/>
4-24-06	ID# CK#	Melissa Cupples 1205 S. 20 AVE W Newton, IA 50208		25 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 500 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

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CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
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4-20-06	ID# CK#	Rex N. & Lila Mendenhall 9201 Imperial Ave Kellogg IA 50135		\$ 125 ⁰⁰	<input type="checkbox"/>
4-22-06	ID# CK#	AIAN E. & JOY H. STOUT 735 E 17th St Newton IA 50208		25 ⁰⁰	<input type="checkbox"/>
4-21-06	ID# CK#	Harold & Margaret Deskin 301 E. 19th St. Newton IA 50208		20 ⁰⁰	<input type="checkbox"/>
4-25-06	ID# CK#	ALVIN REAMP 110 N 5th Ave W Newton Ia 50208		25 ⁰⁰	<input type="checkbox"/>
4-23-06	ID# CK#	John & MARGARET Synhorst 1140 D W. 18 St So Newton Ia 50208		50 ⁰⁰	<input type="checkbox"/>
4-20-06	ID# CK#	Joel L. & Deanne R. Herr 313 E 25th St Newton, IA 50208		52 ⁰⁰	<input type="checkbox"/>
5-7-06	ID# CK#	Ruth Cleaverley 302 E 29th St. Newton, Ia 50208		25 ⁰⁰	<input type="checkbox"/>
4-24-06	ID# CK#	Sadie Ruth Keller 719 N 15 Ave W Newton, Ia 50208		20 ⁰⁰	<input type="checkbox"/>
4-20-06	ID# CK#	Bonnie R. MARKUSCH 1905 S. 3 Ave E. Newton IA 50208		25 ⁰⁰	<input type="checkbox"/>
4-21-06	ID# CK#	MARY L. DAY 207 E 28th St. Newton, Ia 50208		52 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 646 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Receipt 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)
friends of TIM MORGAN

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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
5-1-06	ID# CK#	Dr Carney O + Laura LOUCKS 900 W 18th St. NEWTON IA 50208		\$ 50 ⁰⁰	<input type="checkbox"/>
5-1-06	ID# CK#	Mrs Bernard Zetley 5716 Quail Ave MONROE IA 50170		20 ⁰⁰	<input type="checkbox"/>
5-1-06	ID# CK#	Ronald + JoAnne Ehresman 1060 High Ave Newton, IA 50208		20 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	Mrs + Mr William J. Harrison 1113 W 8th N. NEWTON IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	MARILYN G. Keller 706 W 2nd St. S. apt 1 NEWTON IA 50208		20 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	Keith + Andrea Shoemaker 701 S. 20 Ave. W NEWTON IA 50208		35 ⁰⁰	<input type="checkbox"/>
4-18-06	ID# CK#	Jerry E + D. Arlene Funk 421 E. 6 ST PIS. NEWTON IA 50208		57 ⁰⁰	<input type="checkbox"/>
4-18-06	ID# CK#	Val Dean + Phyllis OLSON 1400 W 9th St. NEWTON IA 50208		125 ⁰⁰	<input type="checkbox"/>
4-17-06	ID# CK#	Mary R. Homeier 210 S 2AVE W #15 NEWTON IA 50208		15 ⁰⁰	<input type="checkbox"/>
4-17-06	ID# CK#	Mary R. Homeier 210 S. 2ave W #15 NEWTON IA 50208		11 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 398 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset 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)
Friends of Tim Morgan

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5-1-06	ID# CK#	L.M. PALS 611 E 3rd St. apt 2 NEWTON, IA 50208		\$ 35 ⁰⁰	<input type="checkbox"/>
5-1-06	ID# CK#	Adam W & Janna E. Tudd 7955 W. 36th N, Baxter IA 50028		200 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	DAVE K. LUTCHMAN P.O. Box 459 NEWTON IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	Timothy R. & Wanda R. Blount 1209 N 4th Ave W, NEWTON IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	Penny R. OSBORN 10019 S. 44 Ave W Colfax IA 50054		20 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	ILLA GUTHRIE 3776 N. 19 Ave E, NEWTON, IA 50208		20 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	ALBERT R. MASTERS JR, 1800 S 13 Ave E #8 NEWTON IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	MR & MRS R.T. ASHBY 214 N 6th Ave E, NEWTON IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	Ronald & Elaine FROELICH 1333 S. 20th Ave W NEWTON, IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
5-1-06	ID# CK#	Floyd F. & Violet J. Neef 1995 Republic Ave. E. MONROE IA 50170		35 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 580 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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

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

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<i>4-1-06</i>	ID# CK#	<i>Leon R. & MARY L. Zmolek 707 S 200th W. NEWTON IA 50208</i>		<i>\$ 100⁰⁰</i>	<input checked="" type="checkbox"/>
<i>4-1-06</i>	ID# CK#	<i>MAURICE H PHILLIPS 1109 E 16th St. NEWTON, IA 50208</i>		<i>100⁰⁰</i>	<input checked="" type="checkbox"/>
<i>4-5-06</i>	ID# CK#	<i>NORMAN & Cora Rozendal 2064 Republic Ave W MONROE, IA 50170</i>		<i>100⁰⁰</i>	<input checked="" type="checkbox"/>
<i>4-15-06</i>	ID# CK#	<i>MR & MRS DEAN M. WARD 308 E 28th St NEWTON, IA 50208</i>		<i>35⁰⁰</i>	<input checked="" type="checkbox"/>
<i>5-1-06</i>	ID# CK#	<i>Cash Unitemized Contribution</i>		<i>50⁰⁰</i>	<input checked="" type="checkbox"/>
<i>5-1-06</i>	ID# CK#	<i>J.C. & C.T. MAPLES PO Box 175 Newton, IA 50208</i>		<i>35⁰⁰</i>	<input checked="" type="checkbox"/>
<i>4-18-06</i>	ID# CK#	<i>J.C. & C.T. MAPLES PO Box 175 NEWTON IA 50208</i>		<i>35⁰⁰</i>	<input type="checkbox"/>
<i>5-1-06 5-2-06</i>	ID# CK#	<i>RANDAL CALDWELL 1105 S 13 Ave W Newton IA 50208</i>		<i>50⁰⁰</i>	<input checked="" type="checkbox"/>
<i>5-01-06 4-30-06</i>	ID# CK#	<i>Joel D & Janet L. Shields 1033 Howest Newton IA 50208</i>		<i>35⁰⁰</i>	<input checked="" type="checkbox"/>
<i>5-1-06</i>	ID# CK#	<i>Ford & Thompson 313 E 15th N Newton IA 50208</i>		<i>20⁰⁰</i>	<input type="checkbox"/>
SUB-TOTAL				<i>\$560⁰⁰</i>	
TOTAL (if last page of this schedule)				<i>\$</i>	

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Reset Form

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<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)
Friends of Tim MORGAN

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4-18-06	ID# CK#	CASH unitemized Contribution		\$ 30 ⁰⁰	<input checked="" type="checkbox"/>
3-30-06	ID# CK#	Dorothy A. PETROFF 2908 S 3rd Ave E, Newton, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
3-30-06	ID# CK#	Larry & Dorothy Wood 1722 N. 10 Ave E, Newton, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
3-30-06	ID# CK#	MARY J. BUNSE 1004 E. 15th St., Newton, IA 50208		20 ⁰⁰	<input checked="" type="checkbox"/>
3-30-06	ID# CK#	CASH unitemized Contribution		30 ⁰⁰	<input checked="" type="checkbox"/>
3-30-06	ID# CK#	Robert & Tamara Kuhn 1040 S. 15 Ave W Newton, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
3-30-06	ID# CK#	STEVEN R. CRYSTAL FAIOR 2488 N 63rd Ave E, NEWTON, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
4-14-06	ID# CK#	James E & Doris Sparks 800 Meadowbrook Ave NEWTON, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
4-14-06	ID# CK#	William D & Margaret A. EHLER 1308 S. 9 Ave E NEWTON, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
4-14-06	ID# CK#	Leland Smith 844 High Ave NEWTON, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 505 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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3-11-06	ID# CK#	RITA A. BAKER 405 W 11th St NEWTON, IA 50208		\$ 20 ⁰⁰	<input checked="" type="checkbox"/>
3-15-06	ID# CK#	DONNALI FARLAND 110N. 5th Ave. #311 NEWTON, IA 50208		20 ⁰⁰	<input type="checkbox"/>
3-23-06	ID# CK#	Dennis M. & CAROL B. JONES 5468 IV 95 Avenue BAXTER, IA 50628		50 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	Jean L Cleere 1107 S. 14th Ave W NEWTON, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	L.M. PALS 611 E 3rd St. S. apt 2 NEWTON, IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
3-20-06	ID# CK#	Carl Wilford ROTHschild - BOND ANN Frank ROTHschild - BOND 4 LARCHwood CT, NEWTON, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
3-18-06	ID# CK#	DEAN R & DEARA COOK 405 E. 4th S. NEWTON, IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
3-13-06	ID# CK#	DOVIS B. FARMELL 500 1st St. N. apt 300 NEWTON, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	L.D BARTON 108 N 2nd Ave E NEWTON, IA 50208		100 ⁰⁰	<input type="checkbox"/>
4-18-06	ID# CK#	Jerry & Sherill VAN DYK 13675 Hwy F-62 E LYNNVILLE, IA 50153		25 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 535 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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3-20-06	ID# CK#	BYETTA & BECKY DANIELS 1103 N HOME W NEWTON, IA 50208		\$ 35 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	DOUGLAS R. & SUSAN B. WILSON 1105 W 12 ST. S. NEWTON, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	JOHN W. CANNON 6617 HWY F36W NEWTON, IA 50208		150 ⁰⁰	<input type="checkbox"/>
3-14-06	ID# CK#	ILIA GUTHRIE 3776 N IOWA E. NEWTON, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	BRYCE A. & LAUREL L. HUNTER 3364 LINCOLN ST. NEWTON, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
3-15-06	ID# CK#	RONALD & VICTORIA NAGEL 1116 16 ST. N. NEWTON, IA 50208		20 ⁰⁰	<input type="checkbox"/>
3-14-06	ID# CK#	DENNIS M. & CAROL B. JONTZ 5468 75TH AVE W N. BAXTER, IA 50028		50 ⁰⁰	<input checked="" type="checkbox"/>
3-14-06	ID# CK#	E. K. SHAW 6 LARCHWOOD CT, NEWTON, IA 50208		50 ⁰⁰	<input type="checkbox"/>
3-14-06	ID# CK#	LEON R & MARY L. ZMOLEK 707 S 20th W NEWTON IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
3-14-06	ID# CK#	RONALD W. & MARCELYN W. HELMS 1 LARCHWOOD CT, NEWTON, IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 675 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset 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)
friends of TIM MORGAN

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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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
3-23-06	ID# CK#	Robert L. Smith 218 N 6 Ave E Newton IA 50208		\$ 20 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	Michael Kaldenberg 602 E 16 St N Newton, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	Richard J. Boggess 1502 1st St. N, Newton, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
3-9-06	ID# CK#	Donald & Doris K. Byers 720 W 11 St S, Newton, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	L.H. & K.A. Gause 722 W 12 St S Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	Bruce & Bev Curtis 4909 Hwy F. 4 SW. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	Cosine Hadley 1100 S. 6 Ave W Newton, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
3-23-06	ID# CK#	MARY LOU VAN ZEE 2683 Hwy S 74 S, Newton IA 50208		20 ⁰⁰	<input type="checkbox"/>
3-23-06	ID# CK#	John & VERNA J. CHRISTOPHER 820 S. 5 Ave W, Newton IA 50208		35 ⁰⁰	<input type="checkbox"/>
3-23-06	ID# CK#	Vernon & Gloria TERLOUW 10497 S. 68th Ave E. Newton IA 50208		20 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 495 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset 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)
Friends of TIM MORGAN

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3-8-06	ID# CK#	Paul Bay 3408 W 28 th St N Newton Ia 50208		\$ 50 ⁰⁰	<input type="checkbox"/>
3-3-06	ID# CK#	Jarret Houser P.O. Box 1395 NEWTON, IA 50208		25 ⁰⁰	<input type="checkbox"/>
2-25-06	ID# CK#	Kay Koeppe 813 E 10 th St S Newton Ia 50208		50 ⁰⁰	<input type="checkbox"/>
2-26-06	ID# CK#	Cash		10 ⁰⁰	<input checked="" type="checkbox"/>
3-17-06	ID# CK#	Clarice Sigurdson 1114 E 14 th St S, NEWTON IA 50208		20 ⁰⁰	<input checked="" type="checkbox"/>
3-17-06	ID# CK#	MARTHA BRAYTON P.O. Box 861, NEWTON IA 50208		20 ⁰⁰	<input checked="" type="checkbox"/>
3-17-06	ID# CK#	CASH		20 ⁰⁰	<input type="checkbox"/>
3-17-06	ID# CK#	Cash unitemized Contribution		50 ⁰⁰	<input checked="" type="checkbox"/>
3-17-06	ID# CK#	Lelah Main 1133 MONROE Drive Newton IA 50208		75 ⁰⁰	<input checked="" type="checkbox"/>
3-17-06	ID# CK#	Jeff & Sharon M. Hoebelheim rich 713 E 23 rd St N NEWTON, IA 50208		25 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 345 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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Reset Form

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

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(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
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2-25-06	ID# CK#	HARRY DEARINGER 718 E 18th N Newton, IA 50208		\$ 20 ⁰⁰	<input checked="" type="checkbox"/>
2-28-06	ID# CK#	MARY ANN HOELSCHER 3428 HARBOR AVE Newton IA 50208		20 ⁰⁰	<input checked="" type="checkbox"/>
2-26-06	ID# CK#	Pamela & Steven CORNER 1428 N 7th Ave E Newton IA 50208		20 ⁰⁰	<input checked="" type="checkbox"/>
3-2-06	ID# CK#	Roger & Cathy Gilbreath 409 E 17th N Newton IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
2-1-06	ID# CK#	ANN & JEFF ISBELL 610 E 23rd N Newton IA 50208		20 ⁰⁰	<input checked="" type="checkbox"/>
3-2-06	ID# CK#	Rev. John & Karen MOORE 603 E 17th N Newton IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
2-20-06	ID# CK#	Dean Lauterbach 910 S 6th Ave W Newton IA 50208		100 ⁰⁰	<input type="checkbox"/>
3-3-06	ID# CK#	Cheryl Hansen 206 N 9th Ave E NEWTON IA 50208		35 ⁰⁰	<input type="checkbox"/>
2-28-06	ID# CK#	John & Karen Schermerhorn 900 E 12th S Newton IA 50208		25 ⁰⁰	<input type="checkbox"/>
3-8-06	ID# CK#	Porter & Danielle Hamilton 703 S 6th Ave W Newton IA 50208		50 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 425 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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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)
Friends of Tim MORBAN

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02-16-06	ID# CK#	Donald + Doris Byers 720 W. 11 th St. S. Newton, IA 50208		\$100 ⁰⁰	<input checked="" type="checkbox"/>
02-20-06	ID# CK#	Harb + Henriett Selby 712 W. 12 th St. S. Newton, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
02-20-06	ID# CK#	Rick + Gail Hartz 339 E. 25 th St. N. Newton, IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
02-24-06	ID# CK#	Kevin + Susan Lanning 2205 W. 15 th St. S. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-24-06	ID# CK#	Carlton Harford 109 Thomas Jefferson NEWTON, IA 50208		15 ⁰⁰	<input type="checkbox"/>
3-1-06	ID# CK#	Dennis M + Carol B. JONTZ 5468 N 95 th Ave W Bartel, IA 50028		50 ⁰⁰	<input type="checkbox"/>
3-3-06	ID# CK#	Roger + Joyce SLYKHUIS 707 E 16 th St N. Newton IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
2-25-06	ID# CK#	Keith + Helen THORPE 603 E. 16 th St N Newton IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
2-26-06	ID# CK#	TIM TOWNSEND 500 E 17 th St N Newton IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
2-26-06	ID# CK#	Maurice Phillips 1109 E 16 th St S. Newton, IA 50208		35 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$480 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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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)
Friends of Tim MORGAN

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01-28-06	ID# CK#	Suanne M. Rolader 2213 Forrest Creek Dr. Mansfield, TX 76063	Sister	\$ 100 ⁰⁰	<input type="checkbox"/>
02-06-06	ID# CK#	Leland E. Smith 844 High Ave Newton, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
02-06-06	ID# CK#	James & Edna Fowland 1405 S. 9th Ave.-E. Newton, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
02-07-06	ID# CK#	Mark & Linda Guy 2920 Hunter Ave. Newton, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
02-08-06	ID# CK#	Dr. Wayne & Ann Straight 915 S. 6th Ave.-W. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-09-06	ID# CK#	Donald & Carol Moore 204 E. 5th St.-S. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Unitamized Contributions		457 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Ferdinand & Lea Chabot 930 E. 10th St.-S. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Rev. Marvin D. Potter 912 S. 14th Ave.-W. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Donald & Doris Byers 720 W. 11th St.-S. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 932 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

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

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

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12-12-05	ID# CK#	Diane Thatcher 2112 NW 2nd St. Ankeny, IA 50023		\$ 25.00	<input type="checkbox"/>
12-13-05	ID# CK#	Victoria Reynolds 1504 N. 9th Ave. P.E. Newton, IA 50208		25.00	<input type="checkbox"/>
12-13-05	ID# CK#	John Schermerhorn 900 E. 12th St. S. Newton, IA 50208		25.00	<input type="checkbox"/>
12-13-05	ID# CK#	Bob Boyer 759 W. 28th St. S. Newton, IA 50208		100.00	<input type="checkbox"/>
12-13-05	ID# CK#	Mrs. David L. Tweed 612 S. 5th Ave. W. Newton, IA 50208		100.00	<input type="checkbox"/>
12-30-05	ID# CK#	Norm + Coretha Rozendal 2064 Republic Ave. W. Monroe, IA 50170		250.00	<input type="checkbox"/>
1-9-06	ID# CK#	Suanne Rolader 2213 Forest Creek Dr. Mansfield, TX 76063	Sister	500.00	<input type="checkbox"/>
1-17-06	ID# CK#	Avery Wilson 512 E. 17th St. N. Newton, IA 50208		100.00	<input type="checkbox"/>
12-13-05	ID# CK#	Unitemized Contributions Cash		133.00	<input type="checkbox"/>
3-1-06	ID# CK#	Suanne M. Rolader 2213 Forest Creek Dr MANSFIELD, Tex 76063	Sister	200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1458 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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02-13-06	ID# CK#	Ual + Phyllis Olson 1400 W. 9 th St. S. Newton, IA 50208		\$25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Earl + Marilyn Tish 2100 N. 3 rd Ave. E. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Jack + Charlotte Maples PO. Box 175 Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Tom + Jana Hollander 1010 W. 18 th St. S. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	John + Berberne Starrett 517 E. 23 rd St. N. Newton, IA 50208		15 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Gary Haynes 504 E. 20 th St. S. Newton, IA 50208		15 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Russell + Velda Clayton 564 Highway 712 N. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Steve + Mary Kennedy 922 E. 18 th St. N. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Robert + Marjane Main 1621 S. 12 th Ave. E. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Karen Brown P.O. Box 456 Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$230 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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Reset 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	

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02-13-06	ID# CK#	Tom + Ruth Sharp 2200 N. 3 rd Ave. E. Newton, IA 50208		\$ 25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Bill Ward 113 E. 28 th St. S. Newton, IA 50208		15 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Mr. + Mrs. Wayne Timmermeyer 1110 E. 14 th St. S. Newton, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Tim + Wanda Blount 1209 N. 4 th Ave. W. Newton, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Mary Ann Reisetter 4154 N. 4 th Ave. E. Newton, IA 50208		15 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Illa Guthrie 3776 N. 19 th Ave. E. Newton, IA 50208		15 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Gray + Rhonda Leder 913 E. 9 th St. S. Newton, IA 50208		25 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Robert Stanley 500 1st Ave. N. #326 Newton, IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
02-13-06	ID# CK#	Jack + Charlotte Maples P.O. Box 175 Newton, IA 50208		100 ⁰⁰	<input checked="" type="checkbox"/>
02-15-06	ID# CK#	Susan Wilson 1105 W. 12 th St. S. Newton, T		100 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 445 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)

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4-24-06	ID# CK#	Craig + Debra Westmuth 1307 Ridgeway Dr Newton, IA 50208		\$ 52 ⁰⁰	<input type="checkbox"/>
4-18-06	ID# CK#	Jane A. Kutchin 6872 Sharon Dr. 4+bandale, IA 50322		100 ⁰⁰	<input type="checkbox"/>
4-19-06	ID# CK#	Ralph + Val McAdoo 1101 S 14 th Ave W Newton, IA 50208		25 ⁰⁰	<input type="checkbox"/>
4-27-06	ID# CK#	Leo + Marcia Harrington 500 1 st St N, Apt 213 Newton, IA 50208		20 ⁰⁰	<input type="checkbox"/>
4-29-06	ID# CK#	David + Donita Carpenter 733 S. 3 rd Ave E. Newton, IA 50208		25 ⁰⁰	<input type="checkbox"/>
4-24-00	ID# CK#	Keren + Harold Showalter 1413 N 8 th Ave pl E Newton, IA 50208		52 ⁰⁰	<input type="checkbox"/>
4-26-06	ID# CK#	Keith + Mary Ann ECKHART 4180 Hwy #36 W. Newton, IA 50208		50 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 324⁰⁰

TOTAL (if last page of this schedule)

~~\$ 324⁰⁰~~

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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)
Friends of Tim MORGAN

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
5-4-06	ID# CK#	B.G. & PATTY WIFFAN 15272 Hwy/6E, Ginnell IA 50112		\$ 50 ⁰⁰	<input checked="" type="checkbox"/>
5-11-06	ID# CK#	MARTA A. FOLD 115 S 3 AVE E. NEWTON IA 50208		50 ⁰⁰	<input checked="" type="checkbox"/>
5-9-06	ID# CK#	Kenneth & CHARIGNE VAN MARNEN 11856 S. 100 AVE E Sully IA 50251		25 ⁰⁰	<input checked="" type="checkbox"/>
5-12-06	ID# CK#	B. Dwight MORGAN 2009 N 2AVE E. NEWTON IA 50208	Father	500 ⁰⁰	<input type="checkbox"/>
5-14-06	ID# CK#	DONALD W. & CAROL A. MOORE 204 E. 5th S. NEWTON IA 50208		25 ⁰⁰	<input type="checkbox"/>
5-4-06	ID# CK#	June Lee & JERRY ANDERSON 2760 Hwy 14 So. NEWTON IA 50208		52 ⁰⁰	<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

\$ 702⁰⁰

TOTAL (If last page of this schedule)

\$ 10295

* 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



EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

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.

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

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

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
1-19-06	ID# CK# 1001	News Printing Co. 200 1st Ave. E. Newton IA 50208	Print Invitations	\$ 61.56
2-3-06	ID# CK# 1002	USPS 215 S. 2nd Ave. E. Newton, IA 50208	Postage for Invitations	39.00
2-7-06	ID# CK# 1003	OP Printing P.O. Box 7417 Muscatine, IA 52761	Printing of Business cards Signs, notecards, envelopes	481.50
2-9-06	ID# CK# 1004	Forbes Office Equipment 102 N. 2nd Ave. E. Newton, IA 50208	Paper + Envelopes for invitations	59.08
2-10-06	ID# CK# 1005	Forbes Quick Print 117 W. 2nd St. N. Newton, IA 50208	Print Invitations	15.22
2-15-06	ID# CK# 1006	USPS 215 S. 2nd Ave. E. Newton, IA 50208	Postage for invitations	39.00
2-21-06	ID# CK# 1007	USPS 215 S. 2nd Ave. E. Newton, IA 50208	Postage for Invitations + thank you notes	39.00
3-1-06	ID# CK# 1008	Forbes Office Equipment 102 N. 2nd Ave. E. Newton, IA 50208	Name badges	6.97
SUB-TOTAL				\$ 741.33
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



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)

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
3-3-06	ID# CK# 1009	Forbes Quick Print 117 W. 2nd St. N. Newton, IA 50208	Print Invitations	\$ 63.19
3-4-06	ID# CK# 1010	USPS 215 S. 2nd Ave. E. Newton, IA 50208	Postage for invitations	78.00
3-28-06	ID# CK# 1011	DP Printing P.O. Box 747 Muscatine, IA 52761	Printing of Brochures	1077.46
3-29-06	ID# CK# 1012	Forbes Office Equipment 102 N. 2nd Ave. E. Newton, IA 50208	Mailing envelopes	39.83
3-31-06	ID# CK# 1014	News Printing Co. P.O. Box 967 Newton, IA 50208	Print invitations	84.80
3-31-06	ID# CK# 1013	News Printing Co. P.O. Box 967 Newton, IA 50208	Ad in Newton Daily News	50.00
3-31-06	ID# CK# 1015	USPS 215 S. 2nd Ave. E. Newton, IA 50208	Postage - invitations	39.00
4-6-06	ID# CK# 1016	Forbes Office Equipment 102 N. 2nd Ave. E. Newton, IA 50208	Envelopes + paper for invitations + envelope sealer	20.68
SUB-TOTAL				\$ 1452.96
TOTAL (if last page of this schedule)				\$

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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



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)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4-7-06	ID# CK# 1017	USPS 215 S. 2 nd Ave. E. Newton, IA 50208	Postage for invitations & thank you notes	\$ 78.00
4-7-06	ID# CK# 1018	Forbes Quick Print 117 W. 2 nd St. N. Newton, IA 50208	Print labels, sign-in sheets & reply cards	33.85
4-10-06	ID# CK# 1019	Forbes Office Equipment 102 N. 2 nd Ave. E. Newton, IA 50208	Stationary for invitations	22.22 20.77
4-13-06	ID# CK# 1020	USPS 215 S. 2 nd Ave. E. Newton, IA 50208	Postage for fundraising letter	351.00
4-14-06	ID# CK# 1021	Newton Manufacturing Co. 1123 1 st Ave. E. Newton, IA 50208	Yard Signs	2575.80
4-14-06	ID# CK# 1022	Newton Manufacturing Co. 1123 1 st Ave. E. Newton, IA 50208	Magnets	689.00
4-14-06	ID# CK# 1023	USPS 215 S. 2 nd Ave. E. Newton, IA 50208	Postage for fundraising letter & thank you notes	39.00
4-20-06	ID# CK# 1024	Republican Party of Iowa 621 E. 9 th St. Des Moines, IA 50309	Campaign School	25.00
SUB-TOTAL				\$3813.87
TOTAL (If last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

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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



EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

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.

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

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

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4-20-06	ID# CK# counter check	Forbes Office Equipment 102 N. 2 nd Ave. E. Newton, IA 50208	Stationary for Invitations	\$ 21.90
4-26-06	ID# CK# 1025	Right on the Button 1508 Hwy F-36 W. Newton, IA 50208	Campaign buttons	53.00
5-1-06	ID# CK# 1026	Forbes Office Equipment 102 N. 2 nd Ave. E. Newton, IA 50208	Envelope + Poster board	8.06
5-2-06	ID# CK# 1027	Forbes Quick Print 117 W. 2 nd St. N. Newton, IA 50208	Photocopy + labels	4.67
	ID# CK#			
SUB-TOTAL				\$ 87.63
TOTAL (If last page of this schedule)				\$ 6095.79

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).)

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

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



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
2-18-06	Diane Birchard 208 E. 21 st St. N. Newton, IA 50208		Food + Beverages	\$ 148.76	<input checked="" type="checkbox"/>
3-2-06	Michael Kaldenberg 602 E. 16 th St. N. Newton, IA 50208		Food + Beverages	110.00	<input checked="" type="checkbox"/>
3-23-06	Don + Dori Byers 720 W. 11 th St. S. Newton, IA 50208		Food + Beverages	203.00	<input checked="" type="checkbox"/>
3-27-06	Lelah Main 1133 Monroe Dr. Newton, IA 50208		Food + Beverages	20.00	<input checked="" type="checkbox"/>
3-30-06	Pat Mitchell 1005 E. 15 th St. S. Newton, IA 50208		Food + Beverages	20.00	<input checked="" type="checkbox"/>
4-18-06	Jeff + Bev Lloyd 1508 Hwy F 3/6 W. Newton, IA 50208		Food + Beverages	40.00	<input checked="" type="checkbox"/>
5-1-06	Dr. Angel + Connie Martin 998 High Ave. Newton, IA 50208		Food + Beverages	300.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 836.76
 TOTAL (if last page of this schedule) \$ 836.76

*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.