

Reset For...

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>841</u>	
Logged In <u>S</u>	
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Computer <u>WRS</u>	
Audited <u>10-16-06</u>	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

Committee to Elect Mr. Freeman

IMPORTANT: Indicate by # type of committee you are reporting for:
(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 <u>Mary Jo Freeman</u>	Political Party (if applicable) <u>Republican</u>
Office Sought <u>State Representative</u>	District (if Senate or House) <u>52</u>

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.

David K. Crouch (712) 732-2456 10-7-06
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

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

CHECK IF AMENDMENT TO REPORT DATED PM 10-9

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.) \$B 2914.98 2641.08

ADD TOTAL MONEY TAKEN IN THIS PERIOD \$B 4009.40

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 4413.28

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)

SUBTRACT TOTAL MONEY SPENT THIS PERIOD \$B 6924.36

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 7051.36

Schedule F: Loan Repayments total (Attach Schedule F) 7034.36

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3) \$ 1116

**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.

** agrees with July bank stment sent with report*

For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97)	MCNETARY 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 to Elect M.L. Freeman

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
1/27/06	ID# CK#	Allan Jones 5155 Dynamical Way Mason, OH 45040		\$ 600	00
7/28/06	ID# 6498 CK# 1452	Well - PAC 636 Grand Ave. #13 Des Moines, IA 50309		250	00
7/31/06	ID# CK#	Bureau of Rep. Co. Republicans c/o Bud Bachman, Treas. 215 Stony Pt. Dr. Spencerville, Ia 50588		250	00
8/3/06	ID# CK#	Shanda Meyers 6600 Westown Pkwy. West Des Moines, Ia 50266		250	00
8/3/06	ID# CK#	James Robin Meyers 6600 Westown Pkwy West Des Moines, Ia 50266		250	00
8/3/06	ID# CK#	Robert & Shanda Meyers 6600 Westown Pkwy. West Des Moines, Ia 50266		250	00
8/3/06	ID# CK#	J.P. Medvedy 6600 Westown Pkwy West Des Moines, Ia 50266		250	00
8/1/06	ID# 6116 CK# 1392	Iowa Veh. Equipment Dealer 1311 50th St. West Des Moines, IA 50265-0846		100	00
8/7/06	ID# 6433 CK# 457	Alliant Energy 4902 N. Billmore Lane Madison, Wis. 53703		250	00
8/2/06	ID# 6056 CK# 3522	Louis Duerksen 6800 NW 62nd Ave. Minnetonka, IA 50131-6200		1000	00
SUB-TOTAL				\$ 3450	
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) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

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

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect M.L. Freeman

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
8/22/06	ID# 6155 CK# 4456	Iowans for Nat Relief PO Box 209 Ames, IA 52701-0069		\$ 100	00
8/24/06	ID# 6052 CK# 3058	Iowa Agents of IOWA 4000 Westown Pkwy # 200 West Des Moines, 50265		200	00
9/3/06	ID# 6093 CK# 912	Iowa Medical PAC 1001 Grand Ave West Des Moines IA 50265		250	00
6/30/06	ID# CK#	June interest on checking account			192
7/30/06	ID# CK#	July interest on checking account			198
8/30/06	ID# CK#	Aug interest on checking account			185
9/30/06	ID# CK#	Sept interest on checking account			365
6/2/06	ID# * CK#	Iowa Health 6067		200	-
5/2/06	ID# * CK#	Idace		200	-
1/1/06	ID# * CK#	Interest			388

* Previously reported

SUB-TOTAL
S/B 559 40 \$963.28
TOTAL (if last page of this schedule)
S/B 4009 40 \$44

* 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) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

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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 of Elect M & Freeman

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
<i>See amended page</i>				
<i>* 8/12/06</i>	ID# CK#	<i>Storm Lake Chamber</i>	<i>membership</i>	<i>\$ 130.-</i>
<i>8/16/06</i>	ID# CK#	<i>Pico Tribune</i>	<i>newspaper</i>	<i>55.-</i>
<i>8/16/06</i>	ID# CK#	<i>B V Republicans</i>	<i>BOCo. Republicans</i>	<i>100.-</i>
<i>8/16/06</i>	ID# CK#	<i>Fareway</i>	<i>family Soc parade</i>	<i>23.50</i>
<i>10/17/06</i>	ID# CK#	<i>Nat. Preservation Association</i>	<i>Storm Lake water quality</i>	<i>2500.00</i>
<i>10/17/06</i>	ID# CK#	<i>Urban Restoration Project</i>	<i>Restoring streets to area</i>	<i>2500.00</i>
<i>10/17/06</i>	ID# CK#	<i>BOU Young Republicans</i>	<i>gift</i>	<i>500.-</i>
<i>10/17/06</i>	ID# CK#	<i>B.O. Young Republicans</i>	<i>gift</i>	<i>1245.86</i>
<i>* previously reported</i>				SUB-TOTAL \$
				TOTAL (if last page of this schedule) \$ 7054.36

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)(f).)

STATE PAC ETHICS & CAMPAIGN DISCLOSURE BOARD
 OCT 25 2006
 PM 10:23

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect ML Freeman

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
6/2/06	ID# CK#	S.L. Chamber	membership	\$130-
8/6/06	ID# CK#	Pilot Tribune	newspaper	55-
8/10/06	ID# CK#	BV Railsplitters	BV Co. Republicans	100-
8/16/06	ID# CK#	Fareway	Candy for parade	23 ⁵⁰
10/7/06	ID# CK#	Lake Preservation Assoc.	S.L. Water Quality	2500 ⁰⁰
10/7/06	ID# CK#	Swan Restoration Project	Restoring Swans to area	2500 ⁰⁰
✓ 10/20/06	ID# CK#	BV Co. Republicans	gift	1745.86
	ID# CK#			

* Previously Reported

S/B 6924.36 SUB-TOTAL \$
 TOTAL (if last page of this schedule) \$ 7054.36

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).)

Lois L. Crouch, Treasurer -
 10-20-06

(for Schedule B)