FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/2001)	DISCLOSURE REPORT

For Office Use Only
Comm. # 1359
Indexed
Audited
Computer

COMMITTEE NAME (Must be same as on Statement of Organization)
Lalk For Statehouse Committee

IMPORTANT: Indicate type of committee you are reporting for: 4

(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee
(8)Support State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name: David Lalk
Political Party: Republican
Office Sought: District 18 Seat
District (if Senate or House): House # 18

Bradley J. Day — SIGNATURE OF TREASURER (or person filing this report)
563-576-0504 — TELEPHONE
10/18/06 — DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from $20 to $800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Oct 19, 2006 (report date), 18 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR. Indicate one 1

☒ CHECK IF AMENDMENT TO REPORT DATED Oct 19, 2006

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution 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. (This is the total of all monies 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.) ..... $ 1716.58

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) ..... 44925.00 x

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..... $ 46641.58 x

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ... 33035.56 x

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) ..... $ 13606.02 x

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

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $ 85059.78

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ____ YES ____ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/2001)	DISCLOSURE REPORT

For Office Use Only
Comm. # ____
Indexed ____
Audited ____
Computer ____

COMMITTEE NAME (Must be same as on Statement of Organization)
LACK FOR STATEHOUSE Committee

IMPORTANT: indicate type of committee you are reporting for: 4

(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee
(8)Support State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name: DAVID LACK
Political Party: REPUBLICAN
Office Sought: DISTRICT 18 SEAT
District (if Senate or House): HOUSE # 18

Bradley J. Day
SIGNATURE OF TREASURER (or person filing this report)

563-576-0569
TELEPHONE

10/18/06
DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from $20 to $800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A OCT 19, 2006 (report date) REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR. indicate one 1

NOV 2006 PM 11-6

☐ 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 Notice of Dissolution 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. (This is the total of all monies 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.) ..... $ 1716.58

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) ..... 33675.00 x

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..... $ 35391.58 x

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ... 33035.56 x

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) ..... $ 2356.02 x

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

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $ 83543.17

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $ ____

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ____ YES ____ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ ____

For Instructions, See Back of Form

SCHEDULE A (Rev 06/97) — MONETARY RECEIPTS

☒ 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)*

Lack For Statehouse Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR) 2006	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FUNDS RAISED INCOME
9/7	ID# 8992 CK# 1228	The Homeye PAC Mulfe Candidate Committee 300 Wooddale Cir Alexandria VA 22305		$ 1250.00	
9/12	ID# 6092 CK# 1224	Grocers PAC 2540 100th ST STE 100 Des Moines IA 50322		300.00	
9/14	ID# 6160 CK# 2256	Iowa Independent Bankers PAC 1663 22nd ST Suite 302 West Des Moines IA 50266		500.00	
9/13	ID# CK# 12016	NFIB Iowa SAFE Trust 1201 F ST NW Suite 200 Washington, DC 20004		1000.00	
9/14	ID# CK# 2465	The Commonwealth PAC, Iowa 45 School ST 2nd Floor Boston, MA 02108		500.00	
9/14	ID# 6058 CK# 2941	Iowa Chiropractic Society PAC 1605 N Ankeny Blvd Suite 100 Ankeny IA 50021		100.00	
9/19	ID# CK# 4498	Associated General Contractors of Iowa PAC 701 E Court Ave Des Moines IA 50309		1000.00	
9/27	ID# CK# 6270	Charlie Tamayo 604 2nd ST NE Oelwein IA 50662		25.00	
8/2	ID# 6082 CK# 1173	MidAmerican Energy Co 666 Grand Ave Box 657 Des Moines IA 50303		250.00	
9/27	ID# CK# 1041	Iowa Beverages Association PAC 4201 W Town Pkwy STE 250 West Des Moines, IA 50266		500.00	

SUB-TOTAL $ 21175.00

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

SCHEDULE **A** (Rev 06/97) — MONETARY RECEIPTS

☐ 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)*

Lack For Statehouse Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR) 2006	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FUND RAISE INCOM
9/7	ID# 8442 CK# 1228	The Hawkeye PAC MULFF Condak Committee 300 Wooden Dr Alexandria VA 22305		$ 1250.00	
9/12	ID# 6042 CK# 1224	Greens PAC 2540 100th ST STE 100 Des Moines IA 50322		300.00	
9/14	ID# 6160 CK# 22576	Iowa Independent Bankers PAC 1603 22nd ST Suite 202 West Des Moines IA 50266		500.00	
9/13	ID# CK# 12016	NFIB Iowa SAFE TRUST 1201 F ST NW Suite 200 Washington, DC 20004		1000.00	
9/14	ID# CK# 2465	The Commonwealth PAC, Iowa 45 School ST 2nd Floor Boston, MA 02108		5000.00	
9/14	ID# 6058 CK# 2941	Iowa Chiropractic Society PAC 1605 N Ankeny Blvd Suite 100 Ankeny IA 50021		100.00	
9/19	ID# CK# 4498	Associated General Contractors of Iowa PAC 701 E Court Ave Des Moines IA 50309		1000.00	
9/27	ID# CK# 6276	Charlie Tamayo 604 2nd ST NE Oelwein IA 50662		25.00	
8/2	ID# 6082 CK# 1173	MidAmerican Energy Co 666 Grand Ave Box 657 Des Moines IA 50303		250.00	
9/27	ID# CK# 1041	Iowa Beverages Association PAC 4201 W Town Pkwy STE 250 West Des Moines, IA 50266		500.00	

See amended Schedule

SUB-TOTAL $ 9925.00

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

SCHEDULE A (Rev. 06/97) — MONETARY RECEIPTS

☒ 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)*

Lack For Statehouse Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR) 2006	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	Y IF FC FUND RAISE INCOM
10/10	ID# CK# CASH	Steve Michaels 21885 Rose Rd Hawkeye IA 52147		$ 40.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

RECEIVED NOV 2006

SUB-TOTAL $ 40.00

TOTAL *(if last page of this schedule)* $ 44925.00

* 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

SCHEDULE A (Rev. 06/97) — MONETARY RECEIPTS

☐ 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)*

Lack For State House Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR) 2006	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FC FUND-RAISE INCOM
10/10	ID# CK# CASH	Steve Michaels 21885 Rose Rd Hawkeye IA 52147		$ 40.00	
	ID# CK#				
	ID# CK#				
	ID# CK#	See amended Schedule			
	ID# CK#				
	ID# CK#	NOV - 7 2006			
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 40.00

TOTAL *(if last page of this schedule)* $ 33675.00

* 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

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS

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

Lacie For Statehouse Committee

☒ CHECK THIS BOX IF AMENDING FORM

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
2006 10/11	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Direct Mail Printing + Postage	$ 2035.30	
8/23	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Design Logo	75.00	
8/23	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Mail Design	500.00	
8/30	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Postage	641.61	

SUB-TOTAL $ 3252.41

TOTAL (If last page of this schedule) $ 85059.78

*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.

FOR INSTRUCTIONS, SEE BACK OF FORM

X

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS

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

Lacie For State House Committee

☐ CHECK THIS BOX IF AMENDING FORM

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
10/11	Republican Party of Iowa 601 East 4th Des Moines IA 50309		Direct Mail Printing + Postage	$ 2035.80	
			See Amended Schedule		

SUB-TOTAL $ 2035.80

TOTAL (If last page of this schedule) $ 83543.17

*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.

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/2001)	DISCLOSURE REPORT

For Office Use Only
Comm. # 1359
Indexed
Audited
Computer

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Lack For Statehouse Committee

IMPORTANT: indicate type of committee you are reporting for: 4

(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee
(8)Support Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name: David Lack
Political Party: Republican
Office Sought: District 18 Seat
District (if Senate or House): House # 18

WV ETHICS COMMISSION DISCLOSURE BOARD OCT 20 2006 FILED pm 10-19

Bradley J. Day
SIGNATURE OF TREASURER (or person filing this report)

563-528-0509
TELEPHONE

10/18/06
DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from $20 to $800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Oct 19, 2006 (report date), _____ REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.
Indicate one 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 Notice of Dissolution 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. (This is the total of all monies 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.) ..... $ 1716.58

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) ..... 33675.00 x

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.....$ 35391.58 x

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)... 33035.56 x

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) ..... $ 2356.02 x

UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $ _____

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $ 83843.17

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $ _____

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ____ YES ____ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ _____

For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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)*

LACK FOR STATEHOUSE COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	* IF F FUN RAISE INCOM
9/7	ID# 8442 CK# 1228	The Hawkeye PAC Multi Candidate Committee 3400 Woodland Ln Alexandria VA 22309		$ 12500.00	
9/12	ID# 6042 CK# 1224	Grocers PAC 2540 100th ST STE 100 Des Moines IA 50322		300.00	
9/4	ID# 6160 CK# 2256	Iowa Independent Bankers PAC 1603 22nd ST Suite 202 West Des Moines IA 50266		500.00	
9/13	ID# CK# 12016	NFIB Iowa SAFE TRUST 1201 F ST NW Suite 200 Washington, DC 20004		1000.00	
9/14	ID# CK# 2465	The Commonwealth PAC, Iowa 45 School ST 2nd Floor Boston, MA 02108		5000.00	
9/14	ID# 6058 CK# 2941	Iowa Chiropractic Society PAC 1605 N Ankeny Blvd Suite 100 Ankeny IA 50021		100.00	
9/19	ID# CK# 4498	Associated General Contractors of Iowa PAC 701 E Court Ave Des Moines IA 50309		1000.00	
9/27	ID# CK# 6270	Charlie Tamayo 604 2nd ST NE Oelwein IA 50662		25.00	
8/2	ID# 6082 CK# 1173	MidAmerican Energy Co 666 Grand Ave Box 657 Des Moines IA 50303		250.00	
9/27	ID# CK# 1041	Iowa Beverages Association PAC 4201 W Town Pkwy STE 250 West Des Moines, IA 50266		500.00	

See amended Schedule

SUB-TOTAL $ 9925.00

TOTAL *(if last page of this schedule)* $

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

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

LACK FOR STATEHOUSE COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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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 FC FUND-RAISE INCOM
9/30	ID# CK# 5765	Terry Dehmlow 331 Main St Box 76 Denver, IA 50622		$ 75.00	
9/24	ID# 6101 CK# 3246	Motor Carriers PAC Box 6121 East Des Moines Stn Des Moines, IA 50309		500.00	
9/29	ID# 6125 CK# 2576	Iowa Realtors PAC 1370 NW 114th St #100 Clive IA 50325		2000.00	
10/2	ID# 6155 CK# 4523	Farmers For Tax Relief PAC Box 209 Muscatine, IA 52761		1500.00	
9/25	ID# CK# 4136	IFBF PAC 5400 University Ave West Des Moines IA 50266		1000.00	
9/21	ID# CK# 1035	21st Century Freedom State PAC Inc 355 Lexington Ave New York, NY 10017		2500.00	
9/6	ID# 6486 CK# 1607	Iowa Telecom PAC 115 S 2nd Ave W Newton, IA 50208		150.00	
7/17	ID# 6116 CK# 1354	Iowa Dealers PAC Box 65846 West Des Moines IA 50265		100.00	
7/21	ID# 6069 CK# 2348	Iowa Industry PAC 901 Walnut Suite 100 Des Moines IA 50309		1000.00	
8/9	ID# CK# 8471	Deere PAC 666 Grand Ave Suite 1707 Des Moines IA 50309		1500.00	
			SUB-TOTAL	$ 10325.00	
			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

☐ CHECK THIS BOX IF AMENDING FORM

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

Lake For Statehouse Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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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 FC FUND-RAISE INCOM
8/4	ID# CK# 440	Alliant Energy Iowa/Minnesota Cont Action Comm 4902 N Biltmore Lane Madison, WI 53703		$ 250.00	
7/24	ID# CK# 1204	The Hawkeye Pac 3400 Woodland Ln Alexandria, VA 22309		1000.00	
7/27	ID# CK# 1077	David Balk 24856 320th St Wauconda, IA 52171		25.00	
7/27	ID# CK# 1976	Wilma Brooka 319 Hwy 150 North West Union IA 52175		100.00	
7/25	ID# CK# 4414	Pro Earth Environmental 11720 210th St West Union IA 52175		300.00	
7/22	ID# CK# 4855	Roberta Mahoney 100 Hillside Dr E Oelwein IA 50662		50.00	
7/15	ID# CK# 649	Richard Kepler 20558 R Ave Hawkeye IA 52147		10.00	
7/28	ID# CK# 5495	Jackson Cline 239 S Walnut St West Union IA 52175		100.00	
7/17	ID# CK# 11713	MARK Rhea 3016 110th St Sumner, IA 50674		50.00	
7/21	ID# CK# 237	Paul Bemiss P.O. Box 493 West Union, IA 52175		200.00	
			SUB-TOTAL	$ 2085.00	
			TOTAL *(if last page of this schedule)*	$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97) — MONETARY RECEIPTS

☐ CHECK THIS BOX IF AMENDING FORM

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

Lack For Statehouse Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FC FUND-RAISE INCOM
7/30	ID# CK# 7457	Ladonna Luiken 507 W Main Steamboat Rock, IA 50672		$ 25.00	
7/21	ID# CK# 267	Paul Bemiss Box 493 West Union IA 52175		200.00	
7/15	ID# CK# 8241	The Commonwealth PAC Iowa 45 School St 2nd Floor Boston MA 02108		750.00	
7/15	ID# CK# 8221	Richard Reynolds 1357 Sable Ave Sumner IA 50674		25.00	
7/30	ID# 6237 CK# 1857	ABATE PAC 3118 Eastern Ave NE Cedar Rapids IA 52402		150.00	
8/14	ID# 6058 CK# 2854	Iowa Chiropractic Society PAC 1605 N Ankeny Blvd Suite 100 Ankeny IA 50021		100.00	
8/14	ID# 6118 CK# 2350	Iowa Optometric Association PAC 1454 30th St STE 204 West Des Moines IA 50266		200.00	
8/9	ID# 4059 CK# 2900	Iowa Committee of Automotive Retailers 1111 Office Park Rd West Des Moines IA 50265		100.00	
8/14	ID# 9459 CK# 1367	Federation of Iowa Insurers PAC Box 1756 Des Moines IA 50306		250.00	
8/14	ID# 6430 CK# 1428	Iowa Rural Water State PAC 4221 S 22nd Ave E Newton, IA 50208		50.00	

SUB-TOTAL $ 1850.00

TOTAL *(if last page of this schedule)* $

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· For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97) — MONETARY RECEIPTS

☐ 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)*

Lack For State House Committee

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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 FC FUND-RAISE INCOM
8/14	ID# 6054 CK# 3546	Bankers Unite in Legislative Decisions 8800 NW 62nd Ave Johnston IA 50131		$ 500.00	
8/15	ID# CK# 7161	Ervin Dennis 1034 W 15th St Cedar Falls IA 50613		50.00	
7/25	ID# 6021 CK# 1998	Credit Union PAC Box 10409 Des Moines IA 50306		250.00	
8/14	ID# 6059 CK# 2801	Iowa Committee of Auto Retailers 1111 Office Park Rd West Des Moines IA 50265		500.00	
8/15	ID# 6155 CK# 4466	Farmers For Tax Relief PAC Box 209 Muscatine IA 52761		1500.00	
8/17	ID# CK# 4380	Associated General Contractors of Iowa PAC 701 E Court Ave Des Moines IA 50309		1500.00	
8/10	ID# 6291 CK# 2497	IHA PAC 100 E Grand Suite 100 Des Moines IA 50309		500.00	
8/24	ID# 6059 CK# 2907	Iowa Committee of Auto Retailers 1111 Office Park Rd West Des Moines IA 50265		500.00	
8/14	ID# 6052 CK# 3034	Independent Insurance Agents of Iowa 4000 Westown Pkwy Ste 200 West Des Moines IA 50265		100.00	
8/31	ID# 6073 CK# 980	Iowa Medical PAC 1001 Grand Ave West Des Moines IA 50265		250.00	

SUB-TOTAL $ 5650.00

TOTAL *(if last page of this schedule)* $

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•For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97) — MONETARY RECEIPTS

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

Lack For Statehouse Committee

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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	Y IF FC FUND-RAISE INCOM
9/5	ID# CK# 14980	Richard Smith 113 W 1st St Sumner IA 50674		$ 25.00	
9/5	ID# CK# 5362	Timothy Sexton 119 N Carpenter Sumner IA 50674		100.00	
9/7	ID# CK# 618	Bremer Co Republican Central Committee Waverly IA 50677		750.00	
9/6	ID# 6101 CK# 3193	Motor Carriers PAC Box 6121 East Des Moines Stn Des Moines IA 50309		500.00	
9/11	ID# 6146 CK# 1667	Homebuilders Association PAC Des Moines IA 50309		250.00	
10/6	ID# 6323 CK# 3001	Master Builders of Iowa PAC 921 Park St Des Moines IA 50306		500.00	
10/5	ID# 6351 CK# 1122	Petroleum Marketers + Convenience Stores of Iowa 1365 50th West Des Moines IA 50266		250.00	
10/10	ID# CK# 1012	Fayette Co Central Republican Committee Clermont, IA 52135		400.00	
10/10	ID# CK# 1188	Karl Gilbertson 1609 Rainbow Dr Cedar Falls IA 50613		25.00	
10/2	ID# 9742 CK# 1078	All Children Matter - Iowa 951 Iowa St Dubuque IA 52001		1000.00	

SUB-TOTAL $ 3800.00

TOTAL *(if last page of this schedule)* $

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For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97) — MONETARY RECEIPTS

☐ 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)*

Lack For State House Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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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 FC FUND-RAISE! INCOM
10/10	ID# CK# Cash	Steve Michaels 21885 Roe Rd Hawkeye IA 52147		$ 40.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#	See amended schedule			
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 40.00

TOTAL *(if last page of this schedule)* $33675.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING 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.

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

Lalic For State House Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE *(Disbursement)* WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/4	ID# CK# 719	Republican Party of Iowa 621 East 9th Des Moines, IA 50309	Radio Ads	$ 5000.00
9/21	ID# CK# 720	Denver Forum PO Box 509 144 E Franklin St Denver IA 50622	Newspaper Ads	803.25
9/21	ID# CK# 721	Oelwein Daily Register 25 1st St SE Oelwein, IA 50662	Newspaper Ads	2031.84
9/21	ID# CK# 722	Elgin Echo 227 Center St Elgin, IA 52141	Newspaper Ads	1105.62
9/21	ID# CK# 723	Fayette County Union 119 S Vine West Union, IA 52175	Newspaper Ads	1417.86
9/21	ID# CK# 724	Sumner Gazette 106 E St Sumner IA 50674	Newspaper Ads	1673.10
9/22	ID# CK# 725	Republican Party of Iowa 621 East 9th Des Moines IA 50309	TV Ads	12000.00
9/29	ID# CK# 726	Postmaster 113 S Carpenter St Sumner IA 50674	Postage	249.00
			SUB-TOTAL	$ 24280.67
			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 56.6(3)(l).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING 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.

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

CACK For STATE House Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE *(Disbursement)* WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/10	ID# CK# 727	Republican Party of Iowa 621 East 9th Des Moines IA 50309	TV Ad	$5000.00
10/10	ID# CK# 728	O.P. Printing 2610 Park Ave Muscatine, IA 52761	Brochure	1295.57
10/12	ID# CK# 729	Republican Party of Iowa 621 East 9th Des Moines IA 50309	Contribution to Party	2500.00
10/13	ID# CK# 730	Postmaster 113 Carpenter St Sumner IA 50674	STAMPS	156.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL $ 8751.89

TOTAL *(if last page of this schedule)* $ 33035.57

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 56.6(3)(l).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Lack For Statehouse Committee

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING FORM

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
7/24	Republican Party of Iowa 621 East 9th Des Moines IA 50309		TV Ad Shoot	$ 1065.38	
8/14	Iowa Industry PAC 904 Walnut St Suite 100 Des Moines IA 50309		Catering	58.60	
9/5	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Radio Ad	18803.00	
9/13	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Photo Shoot	175.00	
9/13	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Direct Mail	987.71	
9/15	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Direct Mail/ Postage + Printing	1863.85	
9/15	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Direct Mail Bags	484.10	
9/22	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Direct Mail	1905.18	
9/26	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Radio Ad	54,400.00	
10/9	Republican Party of Iowa 621 East 9th Des Moines IA 50309		Direct Mail Design + Mailing	3064.55	

SUB-TOTAL	$ 81807.37
TOTAL (If last page of this schedule)	$

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FOR INSTRUCTIONS, SEE BACK OF FORM

X

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING FORM

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

Lalic For Statehouse Committee

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
10/11	Republican Party of Iowa 601 East 4th Des Moines IA 50309		Direct Mail Printing + Postage	$ 2035.50	
	See amended schedule				

SUB-TOTAL $ 2035.50

TOTAL (if last page of this schedule) $ 83543.17

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