

Reset Form

DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	5064
Logged In	
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)  
Iowans for Miller

**IA ETHICS & CAMPAIGN DISCLOSURE BOARD**  
JAN 18 2007  
FILED

**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 Thomas J. Miller	Political Party (if applicable) Democrat
Office Sought Attorney General	District (if Senate or House)

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.

[Signature] 515-224-9381 1/15/07  
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A \_\_\_\_\_ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED October 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 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.)	\$ 82,635.92
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	2,500.00
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
<u>(Schedule H applies to Candidates' Committees Only)</u>	
<b>SUB-TOTAL</b>	\$ 85,135.92
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	33,804.37
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)	\$ 51,331.55

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) \$ \_\_\_\_\_

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 506.10

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ \_\_\_\_\_

CONSULTANT BREAKDOWN (Schedule G Attached?)  YES  NO

**CANDIDATE COMMITTEES ONLY:**  
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ \_\_\_\_\_

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

FOR INSTRUCTIONS, SEE BACK OF FORM

**Reset Form**

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" 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)  
Iowans for Miller

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
10/12/06	ID# CK# 1274	Internal Revenue Service Odgen, UT	Federal Form 941, Payroll Taxes-Late Penalty	\$ 290.62
10/14/06	ID# CK# 1275	Bankers Trust 665 Locust St. Des Moines, IA 50309	Federal Form 941, Payroll Taxes	\$2,523.50
10/14/06	ID# CK# 1276	Treasurer, State of Iowa Hoover Building Des Moines, IA 50319	State Employment Taxes	\$406.00
10/14/06	ID# CK# 1277	Iowa Workforce Development 1000 East Grand Des Moines, IA 50319	State Unemployment Taxes	\$105.00
10/14/06	ID# CK# 1278	Bankers Trust 665 Locust St, Des Moines, IA 50309	Federal Form 940, Unemployment Taxes	\$112.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 3,437.12</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 33,804.37</b>

**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).)

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**DISCLOSURE SUMMARY PAGE**

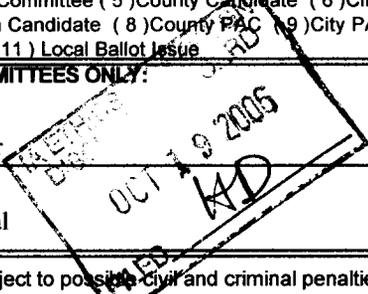
<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
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File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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 Iowans for Miller

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**CANDIDATE COMMITTEES ONLY:**

Candidate Name Thomas J. Miller	Political Party (if applicable) Democrat
Office Sought Attorney General	District (if Senate or House)



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SIGNATURE OF PERSON FILING REPORT: [Signature] TELEPHONE: 515-224-4381 DATE SIGNED: 10/18/06

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 \_\_\_\_\_

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.)

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<b>SUB-TOTAL</b>	\$ 85,135.92
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Schedule F: Loan Repayments total (Attach Schedule F)	_____
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 51,331.55
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$ _____
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$ 506.10
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$ _____
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)	✓ YES ___ NO
<b>CANDIDATE COMMITTEES ONLY:</b>	
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$ _____
<b>STATE COMMITTEES:</b> Submit a reconciled campaign account bank statement in January of each year.	



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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

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

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Iowans for Miller

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7/15/06	ID# CK# 1266	Justin Grad 200 Grand Ave., Apt. 215 Des Moines, IA 50309	wages	\$ 1,196.25
8/1/06	ID# CK# 1268	" "	wages	\$1,196.25
8/15/06	ID# CK# 1270	" "	wages	\$1,196.25
7/15/06	ID# CK# 1267	Matt Miller 1800 Grand Ave., Apt. 216 West Des Moines, IA 50265	wages	\$1,196.25
8/1/06	ID# CK# 1269	" "	wages	\$1,196.25
8/15/06	ID# CK# 1271	Campaign Group, Inc. 7730 Herschel Ave., Suite E La Jolla, CA 92037	consulting fee	\$10,000.00
10/7/06	ID# CK# 1272	Iowa Democratic Party 5661 Fleur Dr. Des Moines, IA 50321	contribution	\$13,386.00
10/7/06	ID# CK# 1273	" "	contribution	\$1,000.00
SUB-TOTAL				\$ 30,367.25
<b>TOTAL (if last page of this schedule)</b>				\$

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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)

Iowans for Miller

**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.)

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

<b>Name of Consultant</b>		
Campaign Group, Inc.		
<b>Mailing Address</b>		
7730 Herschel Ave., Suite E		
<b>City</b>	<b>State</b>	<b>Zip Code</b>
La Jolla, CA		92037

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

**TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE**

**CONTRACT PERIOD (MM/DD/YR)**

From <u>01/01/06</u> To <u>12/1/06</u>	\$ <u>15,000.00</u>
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**ESTIMATES OF PERFORMANCE**

General Consulting

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