

FOR INSTRUCTIONS, SEE BACK OF FL

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1646
Logged In	
Scanned	<input checked="" type="checkbox"/>
Computer	WRS
Audited	3-12-07
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th St. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

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
Barbara Blanchard

Office Sought
Iowa Senate

Political Party (if applicable)
Republican

District (if Senate or House)

JAN 19 2007

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] 712-239-8785 1/18/2007
SIGNATURE OF PERSON FILING REPORT **TELEPHONE** **DATE SIGNED**

I AM FILING A November 3, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED 11/03/2006

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.)	\$ 30,575.10
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)	1,275.00
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>	
SUB-TOTAL	\$ 31,850.10
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	25,835.06
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)	\$ 6,016.04
**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?)	<input checked="" type="checkbox"/> YES <input type="checkbox"/> 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.

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>11646</u>	
Logged In <u>previously</u>	
Scanned <u>filed</u>	
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)

Citizens for Blanchard

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: Barbara Blanchard Political Party (if applicable): Republican

Office Sought: Iowa Senate District (if Senate or House): 1

IOWA ETHICS & CAMPAIGN
 DISCLOSURE BOARD
 JAN 22 2007
 PM 7-19

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.

Tom Kella 712-239-8785 1/18/2007

SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A November 3, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED 11/03/2006

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.)	\$ 30,575.10
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Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1,275.00
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
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SUB-TOTAL	\$ 31,850.10
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	25,835.06
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)	\$ 6,016.04
**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.

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
Citizens for Blanchard

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
10/26/06	ID# CK#	KMEG 100 Gold Cir Dakota Dunes SD 57049	Advertising	\$ 1049.75
10/27/06	ID# CK#	Iowa Right to Life 1500 Illinois Street Des Moines IA 50314	Mailing List	7.08
10/28/06	ID# CK#	Bob Sievers 1320 29th Street Sioux City IA 51104	Meals	56.85
10/29/06	ID# CK#	Staples 840 Gordon Dr Sioux City IA 15501	Office supplies	25.67
	ID# CK#			
<i>g/B 1139.35</i> SUB-TOTAL				\$ 1138.60
TOTAL (if last page of this schedule)				\$ 25,834.06

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).)

Briar Cliff UNIVERSITY

Fax Cover Page

Date: 1/19/2007

From: Tom Kleen

Fax Number: 712-279-1698

Please deliver the following to:

Attention: Iowa Ethics Board

Company: _____

Fax Number: 515 281-3701 Number of Pages 22 (cover included)

Re: 1/19/07 Reports: (1) Citizens for Blanchard
(2) Woodbury County Repub. C. C.

Please contact our office immediately if you do not receive the number of pages indicated above.

Comments: _____

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1646
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Scanned	<i>[Signature]</i>
Computer	WRS
Audited	3-12-07
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)

Citizens for Blanchard

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 Barbara Blanchard	Political Party (if applicable) Republican
Office Sought Iowa Senate	District (if Senate or House) 1

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] 712-239-8785 11/3/06
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A November 3, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED See amended report

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>5/13 30,665.10</u>	\$ 30,575.10
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		1,275.00 ✓
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		\$ 31,850.10
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		25,833.31
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)	<u>5/13 6,016.79</u>	\$ 6,016.79

**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.

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1646
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COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Blanchard

IMPORTANT: Indicate by # type of committee you are reporting for: 1
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 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 Barbara Blanchard	Political Party (if applicable) Republican
Office Sought Iowa Senate	District (if Senate or House) 1

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.

Jan Klean 712-239-8785 11/3/06
SIGNATURE OF PERSON FILING REPORT **TELEPHONE** **DATE SIGNED**

I AM FILING A November 3, 2006 REPORT FOR (1) **ELECTION** / (2) **NON-ELECTION YEAR**.
 (report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED _____

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Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....	1,275.00
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	\$ 31,850.10
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....	25,833.31
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).....	\$ 6,016.79
**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.

For Instructions, See Back of 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)

Citizens for Blanchard

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

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/23/06	ID# CK#	Paul Jackson 2545 Williams Ave. Sioux City IA 51106		\$50	<input type="checkbox"/>
10/23/06	ID# CK#	Clarice Alons 1314 77th Street Hull IA 51239		50	<input type="checkbox"/>
10/23/06	ID# 9728 CK# 038	GOPAC 600 13th St NW, Suite 790 Washington DC 20005		750	<input type="checkbox"/>
10/21/06	ID# CK#	Glen Harden 10 Deer Run Circle McCook Lake SD 57049		250	<input type="checkbox"/>
10/21/06	ID# CK#	Joe Ewing 924 47th Street Sioux City IA 51104		75	<input type="checkbox"/>
10/21/06	ID# CK#	Melissa Tjeerdsma 1090 Pachsama Ct. Sioux City IA 51108		50	<input type="checkbox"/>
10/21/06	ID# CK#	Joseph Giesler 909 Winstone Drive Jefferson SD 57038		50	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1,275

TOTAL (if last page of this schedule)

\$ 1,275

* 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

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)
Citizens for Blanchard

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
10/16/06	ID# CK#	Bright Light Ministry Cherokee, IA	Transportation	\$ 50.00
10/18/06	ID# CK#	Staples 840 Gordon Dr Sioux City IA 51103	Office supplies	25.67
10/18/06	ID# CK#	Staples 840 Gordon Dr Sioux City IA 51103	Office supplies	9.63
10/19/06	ID# CK#	Greater Sioux City Board of Realtors 1001 6th Street Sioux City IA 51101	Luncheon tickets	24.00
10/20/06	ID# CK#	Bass Advertising 815 Nebraska Street Sioux City IA 51101	Radio ads	898.00
10/20/06	ID# CK#	Cable One Advertising 1119 4th Street, #218 Sioux City IA 51101	TV ads	10,044.00
10/22/06	ID# CK#	Heartland Marketing Group P.O. Box 125 Early IA 50535	Printing	338.87
10/22/06	ID# CK#	Barbara Blanchard 1300 46th Street Sioux City IA 51104	Reimbursement -- meals, mileage, etc.	574.64

SUB-TOTAL \$ 11,964.81

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
--------------------------------------	--------------------------

CHECK THIS BOX IF AMENDING FORM

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

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
10/18/06	ID# CK#	Linda Holub 1218 46th Street Sioux City IA 51104	Reimbursement: Office supplies	\$ 201.82
10/17/06	ID# CK#	Staples 840 Gordon Dr Sioux City IA 51103	Office supplies	77.00
10/21/06	ID# CK#	M & M Copy Quick Printing 422 Pierce Street Sioux City IA 51101	Printing	130.61
10/23/06	ID# CK#	Powell Broadcasting 2000 Indian Hills Drive Sioux City IA 51104	Advertising	2882.35
10/24/06	ID# CK#	Clear Channel 1113 Nebraska Sioux City IA 51105	Advertising	1297.10
10/24/06	ID# CK#	KCAU 625 Douglas Sioux City IA 51101	Advertising	4020.00
10/25/06	ID# CK#	KTIV 3135 Floyd Blvd Sioux City IA 51108	Advertising	3876.00
10/26/06	ID# CK#	Holiday Inn 701 Gordon Drive Sioux City IA 51101	Meals	245.02
SUB-TOTAL				\$ 12,729.90
TOTAL (if last page of this schedule)				\$

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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

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)*
Citizens for Blanchard

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
10/26/06	ID# CK#	KMEG 100 Gold Cir Dakota Dunes SD 57049	Advertising	\$ 1049
10/27/06	ID# CK#	Iowa Right to Life 1500 Illinois Street Des Moines IA 50314	Mailing List	7.08
10/28/06	ID# CK#	Bob Sievers 1320 29th Street Sioux City IA 51104	Meals	56.85
10/29/06	ID# CK#	Staples 840 Gordon Dr Sioux City IA 15501	Office supplies	25.67
	ID# CK#			
	ID# CK#	<i>See amended page</i>		
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1138.60
TOTAL (if last page of this schedule)				\$ 25,833.31

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).)

Reset Form

SCHEDULE G (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)

Citizens for Blanchard

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

Name of Consultant		
Powell Broadcasting Company		
Mailing Address		
2000 Indian Hills Drive		
City	State	Zip Code
Sioux City	IA	51104

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From 10/24/06	\$ 2,882.35
To 11/07/06	

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
10/23/06	KSUX Radio, 2000 Indian Hills Drive Sioux City, IA 51104	Broadcast Radio Ads	\$ 1,101.60
10/23/06	KSCJ Radio, 2000 Indian Hills Drive Sioux City, IA 51104	Broadcast Radio Ads	944.35
10/23/06	KKMA Radio, 2000 Indian Hills Drive Sioux City, IA 51104	Broadcast Radio Ads	836.40

APR 16 2007

ESTIMATES OF PERFORMANCE

SUB-TOTAL	\$ 2,882.35
TOTAL (If last page of this schedule)	\$ 2,882.35

Reset Form

SCHEDULE G (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)

Citizens for Blanchard

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

Name of Consultant		
Clear Channel Broadcasting		
Mailing Address		
Box 3009		
City	State	Zip Code
Sioux City	IA	51102

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From <u>10/24/06</u>	\$ <u>1,297.10</u>
To <u>11/07/06</u>	

ESTIMATES OF PERFORMANCE

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
10/24/06	KMNS Radio Box 3009 Sioux City, IA 51102	Broadcast Radio Ads	\$ 163.20
10/24/06	KGLI-FM Box 3009 Sioux City, IA 51102	Broadcast Radio Ads	384.20
10/24/06	KMNS Radio Box 3009 Sioux City, IA 51102	Broadcast Radio Ads	224.40
10/24/06	KGLI-FM Box 3009 Sioux City, IA 51102	Broadcast Radio Ads	525.30

SUB-TOTAL	\$ 1,297.10
TOTAL (If last page of this schedule)	\$ 1,297.10

APR 16 2007