

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1231
Logged In	
Scanned	
Computer	WRS
Audited	5-18-07
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)
George Eichhorn for Iowa House

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: George S. Eichhorn Political Party (if applicable): Republican
 Office Sought: IA House for Representatives District (if Senate or House): 9

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.

Racheale Eichhorn (515) 838-2277 5-11-07
 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 November 3, 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.)

MAY 17 2007

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/B 17,239.92</u>	\$	<u>17,599⁹²</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)			<u>22,380⁰⁰</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>39,979⁹²</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	<u>5/B 29,009.72</u>		<u>27,664²⁶</u>
Schedule F: Loan Repayments total (Attach Schedule F)	<u>(amended)</u>		<u>0</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	<u>5/B 10,610.20</u>	\$	<u>11,051²⁰</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	<u>(amended)</u>	\$	<u>3205⁸⁰</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)		\$	<u>9521⁹¹</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)		\$	
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)		\$	<u>0</u>

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 (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)
 George Eichhorn for Iowa House

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# 697	Postmaster Stratford, IA 50249	Mailing Spouse Letter	\$ 761 ⁰⁰
10/16/06	ID# CK# 698	Wright County Monitor PO Box 153 Clarion, IA 50525	Latham Event Ad	52 ⁵⁰
10/19/06	ID# CK# 703	Postmaster Stratford, IA 50249	Mailing Spouses Letter	636 ³⁸
10/21/06	ID# CK# 704	Pizza Ranch 104 S. Main Clarion, IA 50525	refreshments @ Latham event	35 ⁷⁸
10/21/06	ID# CK# 705	Pizza Ranch 104 South Main Clarion, IA 50525	refreshments @ Latham event	15 ⁹⁴
10/21/06	ID# CK# 706	Postmaster Webster City, IA 50595	stamps *	390,00 309⁰⁰
10/21/06	ID# CK# 707	Hy Vee 823 Second Street Webster City, IA 50595	deportations for fundraiser & refreshments	83 ⁴⁸
10/23/06	ID# CK# 708	Jifi Print 2206 Central Ave Fort Dodge, IA 50501	labels	59 ⁴¹
SUB-TOTAL				\$ 1953 ⁴⁹
TOTAL (if last page of this schedule)				\$

amended

* per candidate 5-17-07

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)
George Eichhorn For Iowa House

IMPORTANT: Indicate by # type of committee you are reporting for: 1
 (1) Statewide Representative/Congressional 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: George S. Eichhorn Political Party (if applicable): Republican
 Office Sought: In House of Representatives District (if Senate or House): 9

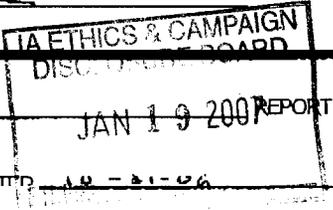
FORM DR-2 DISCLOSURE REPORT
 (Rev. 12/2005)

For Office Use Only
 Comm. # 1231
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File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th, Ste. 1A
 Des Moines, Iowa 50319
 Fax: 515-281-3701

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code Section 68B.26(1)(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.

Rachael Eichhorn (515) 838-7277 1-18-07
 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 12-21-06
 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 17,599.92 amended</u>	\$ <u>17,899.92</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		<u>22,380.00</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>amended</u>	\$ <u>40,279.92</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>27,664.26</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>1,264.46</u>
CASH ON HAND at the end of this reporting period (if final report balances must be zero) (Attach DR-3)	<u>5/13 11,051.20</u>	\$ <u>11,351.20</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)		\$ <u>0</u>
IN-KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)		\$ <u>9,521.91</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)		\$ _____
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <u>X</u> NO	
CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)		\$ <u>0</u>

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

FOR INSTRUCTIONS, SEE BACK OF FORM

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FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
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COMMITTEE NAME (Must be same as on Statement of Organization)

George Eichhorn For Iowa House

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	Political Party (if applicable)
<u>George S Eichhorn</u>	<u>Republican</u>
Office Sought	District (if Senate or House)
<u>IA House of Representatives</u>	<u>HO 9</u>

NOV - 3 2006
fax

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.

Rachele Eichhorn (515) 838-2277 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 _____
- 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>16,419⁹⁵</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>22,380⁰⁰</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>38,799⁹⁵</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>27,664²⁶</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>1,264⁴⁶</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>9,871²³</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>9,521.91</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES	NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0</u>
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.		

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)
George Eichhorn for Iowa House

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(8), 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
10/17/06	ID# CK#	Katerie Seuda 3983 Young Ave Roland, IA 50236		\$ 30 ⁰⁰	<input type="checkbox"/>
10/18/06	ID# 6069 CK# 2408	Iowa Industry PAC 904 Walnut, Ste 100 Des Moines, IA 50309		250 ⁰⁰	<input type="checkbox"/>
10/17/06	ID# CK#	Stan Sheldon 500 Pleasant St Webster City, IA 50595		20 ⁰⁰	<input type="checkbox"/>
10/18/06	ID# CK#	Robert Brinton 227 - 1st Ave NE Clarion, IA 50525		50 ⁰⁰	<input type="checkbox"/>
10/18/06	ID# CK#	Stan Watne 2625 Sycamore Ave Galt, IA 50101		100 ⁰⁰	<input type="checkbox"/>
10/18/06	ID# CK#	Betty Ellis 2844 265th St Dows, IA 50071		100 ⁰⁰	<input type="checkbox"/>
10/19/06	ID# 9742 CK# 107	All Children Matter - Iowa 228 W. Washington St. Ste 115 Alexandria, VA 22314		1000 ⁰⁰	<input type="checkbox"/>
10/19/06	ID# CK#	Bob Merar PO Box 245031 Milwaukee, WI 53224		100 ⁰⁰	<input type="checkbox"/>
10/19/06	ID# 8140 CK# 402	Pfizer PAC 235 East 42nd St New York, NY 10017		500 ⁰⁰	<input type="checkbox"/>
10/19/06	ID# 9744 CK# 1566	21st Century Freedom PAC 355 Lexington Ave New York, NY 10017		2500 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 4650 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). 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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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)
George Eichhorn For Iowa House

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
10/19/06	ID# CK#	Edwin Mohler 1309 Westside Dr. Polk City, IA 50226		\$ 35 ⁰⁰	<input type="checkbox"/>
10/19/06	ID# CK#	Cyndi Chen 1128 22nd St Des Moines, IA 50311		50 ⁰⁰	<input type="checkbox"/>
10/19/06	ID# 8473 CK# 1751	Aquila INC Employee PAC 20 W. 9th Street, 2nd Fl. Kansas City, MO 64105		200 ⁰⁰	<input type="checkbox"/>
10/21/06	ID# 6001 CK# 457000052	Allied Group & Farmland PAC 1100 Locust Des Moines, IA 50391		400 ⁰⁰	<input type="checkbox"/>
10/21/06	ID# 6070 CK# 3452	Iowa Law PAC 521 East Locust St. 3rd Fl. Des Moines, IA 50309		3000 ⁰⁰	<input type="checkbox"/>
10/21/06	ID# CK#	Crystal Gordon 2428 Chase Ave Duncumbe, IA 50532		250 ⁰⁰	<input type="checkbox"/>
10/21/06	ID# CK#	Dennis Graenonboom 1134 - 38th St. Des Moines, IA 50311		25 ⁰⁰	<input type="checkbox"/>
10/21/06	ID# CK#	Robert Rane 515 Lakewood Dr. Carroll, IA 51401		50 ⁰⁰	<input type="checkbox"/>
10/21/06	ID# CK#	Ron Juergens 2222 4 220th St Carroll, IA 51401		250 ⁰⁰	<input type="checkbox"/>
10/25/06	ID# CK#	Steven Sukup 1405 N. Shore Drive Clear Lake, IA 50428		250 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 4510 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)
George Eichhorn for Iowa House

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.

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DATE RECEIVED (MM/DD/YY)	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
10/25/06	ID# 6430 CK# 1485	Iowa Rural Water PAC 4221 S. 22 nd Ave. E. Newton, IA 50208		\$ 100.00	<input type="checkbox"/>
10/25/06	ID# 6487 CK# 2060	Hispanics PAC PO Box 536 Des Moines, IA 50302		200.00	<input type="checkbox"/>
10/25/06	ID# 9698 CK# 552	IAAMB PAC 4949 Westown Pkwy Ste 165-111 West Des Moines, IA 50266		500.00	<input type="checkbox"/>
10/25/06	ID# 6096 CK# 1981	Manufactured Housing PAC 1400 Dean Ave Des Moines, IA 50316		500.00	<input type="checkbox"/>
10/25/06	ID# 8342 CK# 1662	Humane USA PAC PO Box 19224 Washington, DC 20036		500.00	<input type="checkbox"/>
10/26/06	ID# 8431 CK# 5274	Koch PAC 655 15 th St NW, Ste 445 Washington, DC 20005		500.00	<input type="checkbox"/>
10/26/06	ID# CK#	Thomas Cope 8532 Newbury Ct Johnston, IA 50131		250.00	<input type="checkbox"/>
10/26/06	ID# 6079 CK# 2115	IA Podiatry PAC 525 E.W. 5 th St., Ste A Des Moines, IA 50309		150.00	<input type="checkbox"/>
10/26/06	ID# 8508 CK# 126	Midwest Grain Processors PAC 1660 42 nd St Lakota, IA 50451		100.00	<input type="checkbox"/>
10/26/06	ID# CK#	James Johnson 2419 Fairbanks Moorland, IA 50566		15.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2915.00	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE A (Rev. 07/03)	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)
George Eichhorn For Iowa House

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/YY)	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
10/26/06	ID# CK#	Carla Wilcox 3135 Tunnell Mill Rd Stratford, IA 50249		\$ 15 ⁰⁰	<input type="checkbox"/>
10/26/06	ID# 9675 CK# 1083	OAAI PAC Po Box 7255 Des Moines, IA 50309		150 ⁰⁰	<input type="checkbox"/>
10/26/06	ID# 9752 CK# 108	Iowa PA-PAC Po Box 222 Redfield, IA 50233		140 ⁰⁰	<input type="checkbox"/>
10/26/06	ID# 6118 CK# 2391	IA Optometric Ass'n PAC 1454 - 30 th St. Ste 204 West Des Moines, IA 50266		250 ⁰⁰	<input type="checkbox"/>
10/26/06	ID# 9687 CK# 1091	Grinnell Mutual Reinsurance PAC 4215 Hwy 146 Grinnell, IA 50112		250 ⁰⁰	<input type="checkbox"/>
10/27/06	ID# CK#	Cal Hultman d/b/a Hultman Company 1200 - 57 th St West Des Moines, IA 50266		250 ⁰⁰	<input type="checkbox"/>
10/27/06	ID# CK#	Margo Keller 2655 - 305 th St Blairsburg, IA 50034		200 ⁰⁰	<input type="checkbox"/>
10/27/06	ID# CK#	Janece Valentine 319 Woodmar Heights Fort Dodge, IA 50501		100 ⁰⁰	<input type="checkbox"/>
10/27/06	ID# CK#	Chris Holt 6471 Theresa Dr. Johnston, IA 50131		50 ⁰⁰	<input type="checkbox"/>
10/28/06	ID# 6494 CK# 84368	Sac & Fox Tribe of the Mississippi 349 Meskwaki Rd Tama, IA 52339		4000 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 5405 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)
George Eichhorn For Iowa House

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/YYR)	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
10/28/06	ID# 6070 CK# 3478	Iowa Law PAC 521 E. Locust St. 2 nd Fl. Des Moines, IA 50309		\$ 2000 ⁰⁰	<input type="checkbox"/>
10/28/06	ID# CK#	Jerry Schnurr III 1130 N. 19 th Fort Dodge, IA 50501		100 ⁰⁰	<input type="checkbox"/>
10/28/06	ID# CK#	Dr. Gregory Maharry DDS Po Box 383 Webster City, IA 50595		50 ⁰⁰	<input type="checkbox"/>
10/28/06	ID# 6101 CK# 3262	Motor Carriers PAC Po Box 6121, East Des Moines Stn. Des Moines, IA 50309		500 ⁰⁰	<input type="checkbox"/>
10/30/06	ID# CK#	Candy Rector 1025 N. Terrace Drive webster City, IA 50595		50 ⁰⁰	<input type="checkbox"/>
10/30/06	ID# CK#	Leslie Deke 4440 E. Ave. NE Cedar Rapids, IA 52402		50 ⁰⁰	<input type="checkbox"/>
10/30/06	ID# CK#	Lloyd Bierma 488A 12 th Ave. Circle NE Sioux Center, IA 51280		100 ⁰⁰	<input type="checkbox"/>
10/30/06	ID# CK#	James Deane 4904 Ravine Park Ln. Sioux City, IA 51106		100 ⁰⁰	<input type="checkbox"/>
10/31/06	ID# 6046 CK#	Justice For All PAC 218' 6 th Ave. Ste 526 Des Moines, IA 50309		500 ⁰⁰	<input type="checkbox"/>
10/31/06	ID# 6234 CK# 4175	IA Farm Bureau PAC 5400 University Avenue West Des Moines, IA 50266		1000 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 4450 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). 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

Reset 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)

George Eichhorn for Iowa House

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# 697	Postmaster Stratford, IA 50249	Mailing Spouse Letter	\$ 761 ⁰⁰
10/16/06	ID# CK# 698	Wright County Monitor PO Box 153 Clarion, IA 50525	Latham Event Ad	52 ⁵⁰
10/19/06	ID# CK# 703	Postmaster Stratford, IA 50249	Mailing Spouses Letter	636 ³⁸
10/21/06	ID# CK# 704	Pizza Ranch 104 S. Main Clarion, IA 50525	refreshments @ Latham event	35 ⁷⁸
10/21/06	ID# CK# 705	Pizza Ranch 104 South Main Clarion, IA 50525	refreshments @ Latham event	15 ⁹⁴
10/21/06	ID# CK# 706	Postmaster Webster City, IA 50595	stamps	309 ⁰⁰
10/21/06	ID# CK# 707	Hy Vee 823 Second Street Webster City, IA 50595	decorations for fundraiser & refreshments	83 ⁴⁸
10/23/06	ID# CK# 708	Jifi Print 2206 Central Ave Fort Dodge, IA 50501	labels	5941
SUB-TOTAL				\$ 1953 ⁴⁹
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)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset 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)
George Eichhorn For Iowa House

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
10/23/06	ID# CK# 709	Christian Alliance PO Box 65066 West Des Moines, IA 50265	Family Awards Banquet Table to Enhance Candidacy	\$ 500 ⁰⁰
10/23/06	ID# CK# 710	Tiffance Hotel 901 Bank St Webster City, IA 50595	Campaign work - services	600 ⁰⁰
10/23/06	ID# CK# 711	Roger Hughes PO Box 171 Webster City, IA 50595	drafting campaign documents & materials	500 ⁰⁰
10/24/06	ID# CK# 712	Racheale Eichhorn PO Box 140 Stratford, IA 50249	Repay loans from previous report, \$34.70. See Schedule "F"	- 0 -
10/24/06	ID# CK# 713	George Eichhorn PO Box 140 Stratford, IA 50249	Repay loans from previous report \$1229.76 See Schedule "F"	- 0 -
10/24/06	ID# CK# 714	Republican Party of IA 621 E 9th St. Des Moines, IA 50309	Contribution to Party	5000 ⁰⁰
10/24/06	ID# CK# 715	Hope for America PAC c/o Joel Smits 1001 Office Pl Rd, Ste. 19 West Des Moines, IA 50265	reimburse inappropriate contribution - shown on Schedule "A" 10-15-05 \$100 ⁰⁰ on last report	0
10/24/06	ID# CK# 716	Swallow Fabric Structure PO Box 1197 Ottumwa, IA 52501	sign boards	500 ⁰⁰
SUB-TOTAL				\$ 7100 ⁰⁰
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

Reset 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)
George Eichhorn For Iowa House

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
10/25/06	ID# CK# 717	KQWC Radio Hwy 20 East Webster City, IA 50595	radio advertisement	\$ 3000 ⁰⁰
10/27/06	ID# CK# 718	Eagle Grove Eagle PO Box 6 Eagle Grove, IA 50533	newspaper ad	222 ⁰⁰
10/27/06	ID# CK# 719	Clarion Monitor PO Box 153 Clarion, IA 50525	newspaper ad	140 ⁰⁰
10/27/06	ID# CK# 720	Dows Advocate Dows, IA	newspaper ad	546 ⁰⁰
10/28/06	ID# CK# 721	Belmond Independent PO Box 126 Belmond, IA 50421	newspaper ads	488 ⁰⁰
10/28/06	ID# CK# 722	Republican Party of IA 621 E. 9 th St Des Moines, IA 50309	contribution	12,000 ⁰⁰
10/28/06	ID# CK# 723	Kmart Webster City, IA 50595	cleaning supplies - misc. items for fundraiser	20 ⁷⁰
10/28/06	ID# CK# 724	Fort Dodge Messenger PO Box 659 Fort Dodge, IA 50501	newspaper ads	457 ⁸⁰
SUB-TOTAL				\$ 16,383 ¹⁰
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

Reset 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)
 George Eichhorn for Iowa House

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
10/28/06	ID# CK# 725	Godfather's Pizza 2nd Street webster City, IA 50595	refreshments for campaign workers	\$ 30 ⁰⁰
10/28/06	ID# CK# 726	Wright County Republicans Clurion, IA 50525	contribution	500 ⁰⁰
10/28/06	ID# CK# 727	Staples Ames, IA 50010	labels	26 ⁹²
10/28/06	ID# CK# 728	Lowes Ames, IA 50010	sign ties	27 ³⁵
10/30/06	ID# CK# 729	Hamilton County Republicans Webster City, IA 50595	mailings - contribution	750 ⁰⁰
10/30/06	ID# CK# 731	Postmaster Stratford, IA 50249	stamps	195 ⁰⁰
10/31/06	ID# CK# 732	Postmaster Stratford, IA 50249	stamps -	404 ⁷⁰
10/31/06	ID# CK# 733	Webster City Freeman Journal P O Box 190 Stratford, IA 50249	advertisements	293 ⁷⁰
SUB-TOTAL				\$ 2227 ⁶⁷
TOTAL (if last page of this schedule)				\$ 27,664 ²⁶

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)(l).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
George Etchhorn for IA House

Reset Form

SCHEDULE E (Rev. 09/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YYR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/16/06	Republican Party of IA 621 E. 9th Des Moines, IA 50309		Direct Mail	\$ 2,548 ³⁶	<input type="checkbox"/>
10/18/06	Republican Party of IA 621 E. 9th Des Moines, IA 50309		Direct mail	2,064 ⁹⁷	<input type="checkbox"/>
10/18/06	Republican Party of IA 621 E. 9th Des Moines, IA 50309		Radio Ads	1,060 ⁸⁰	<input type="checkbox"/>
10/20/06	Republican Party of IA 621 E. 9th Des Moines, IA 50309		Newspaper Ads	400 ⁰⁰	<input type="checkbox"/>
10/20/06	Republican Party of IA 621 E. 9th Des Moines, IA 50309		TV Ads	2,292 ²¹	<input type="checkbox"/>
10/26/06	IFBF PAC 5400 University Ave West Des Moines, IA 50266		Direct Mail	1,155 ⁵⁷	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 9521 ⁹¹	
TOTAL (if last page of this schedule)				\$ 9521 ⁹¹	

*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

COMMITTEE NAME (Must be same as on Statement of Organization)
George Eichhorn For IA House

Reset Form

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1264.46

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
10/24/06	Racheale Eichhorn PO Box 140 Stratford, IA 50249	Spouse	\$ 34 ⁷⁶
10/24/06	George Eichhorn PO Box 140 Stratford, IA 50249	Candidate	1229 ⁷⁶

TOTAL CASH REPAYMENTS (PART II) \$ 1264.46

From Schedule E - TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0

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