

Reset Form

DISCLOSURE SUMMARY PAGE

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

Office Sought
 State Legislator (House)

Political Party (if applicable)
 Democratic

District (if Senate or House)
 50

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1636
Logged In	e
Scanned	
Computer	
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th 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.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.

Linda Green
 SIGNATURE OF PERSON FILING REPORT

(712) 297-5070
 TELEPHONE

November 2, 2006
 DATE SIGNED

I AM FILING A October 15 - October 31, 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.)	\$	2,758.41
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		4,200.00
Schedule F: Loans Received total (Attach Schedule F).....		0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		0.00
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	6,958.41
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....		5,820.60
Schedule F: Loan Repayments total (Attach Schedule F).....		0.00
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....	\$	1,137.81
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	0.00
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	16,751.08
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$	0.00
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)	\$	0.00
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.		

For Instructions, See Back of Form

Reset 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)
Lynne Gentry 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
10/17/06	ID# CK#	Larry E Meyer 426 Austin Street Rockwell City, IA 50579		\$50.00	<input checked="" type="checkbox"/>
10/17/06	ID# CK#	Linda Minnehan 248 Eaton Avenue Churdan, IA 50050		35.00	<input checked="" type="checkbox"/>
10/17/06	ID# CK#	Gary L Mays 917E 8th Avenue PO Box 176 Manson, IA 50563		10.00	<input checked="" type="checkbox"/>
10/17/06	ID# CK#	Iowa Democratic Party-Truman Fund 5661 Fleur Drive Des Moines, IA 50321		750.00	<input type="checkbox"/>
10/20/06	ID# CK#	D H Fischer 4605 NE Sunnybrook Lane Kansas City, MO 64117		15.00	<input checked="" type="checkbox"/>
10/20/06	ID# CK#	Richard Black 3228 Xenia Avenue Farnhamville, IA 50538		35.00	<input checked="" type="checkbox"/>
10/20/06	ID# CK#	Christine Sedlacek 707 E Lake Street Rockwell City, IA 50579		25.00	<input checked="" type="checkbox"/>
10/20/06	ID# CK#	Katherine Linder 2561 Twin Lakes Road Manson, IA 50563		25.00	<input checked="" type="checkbox"/>
10/20/06	ID# CK#	Virginia Rasmussen Box 166 Manilla, IA 51454		25.00	<input checked="" type="checkbox"/>
10/20/06	ID# CK#	JoAnn Lund 3929 Linden Circle Colorado Springs, CO 80907		50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1020.00	
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

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)
Lynne Gentry for Iowa House

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10/20/06	ID# CK#	Myra Kail PO Box 273 Gilmore City, IA 50541	sister-in-law	\$50.00	<input checked="" type="checkbox"/>
10/20/06	ID# CK#	Eleanor F Anderson 1408 Union Street Gowrie, IA 50543	aunt	100.00	<input checked="" type="checkbox"/>
10/20/06	ID# CK#	Ed Irwin 2532 330th Street Rockwell City, IA 50579		100.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	unitemized contributions		10.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	Mrs. Betty Jones 133 Stewart Rockwell City, IA 50579		20.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	Richard E. Grannan 841 Main Street Rockwell City, IA 50579		25.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	Richard Black 3228 Xenia Avenue Farnhamville, IA 50538		25.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	D P Wills 507 S Oak Jefferson, IA 50129		25.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	Diane B Patton 106 E Austin Rockwell City, IA 50579		25.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	Helen Miller 1936 15th Avenue North Fort Dodge, IA 50501		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 405.00	
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)
Lynne Gentry for Iowa House

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/22/06	ID# CK#	Earl W Trachsel 520 N Lincoln Lake City, IA 51449		\$25.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	Marty Minnick 413 Austin Rockwell City, IA 50579		50.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	Denise R Wenck-Brobst 300 6th Street Lohrville, IA 51453		50.00	<input checked="" type="checkbox"/>
10/22/06	ID# CK#	Paul Fields 3536 380th Street Farnhamville, IA 50538		50.00	<input checked="" type="checkbox"/>
10/25/06	ID# CK#	Stanley Louis Rosenthal 10864 Kingston Huntington Woods, MI 48070		50.00	<input checked="" type="checkbox"/>
10/25/06	ID# 8038 CK# 375242	United Food & Commercial Workers International Union, CLC 1775 K Street NW		500.00	<input type="checkbox"/>
10/26/06	ID# 8038 CK# 375242	United Food & Commercial Workers International Union, CLC 1775 K Street NW		1000.00	<input type="checkbox"/>
10/29/06	ID# CK#	Kathaleen Hiler 2102 290th Street Rockwell City, IA 50579		50.00	<input checked="" type="checkbox"/>
10/31/06	ID# 6406 CK# 1093	EMILY'S List-NF Fund 1120 Connecticut Avenue NW Ste 1100 Washington, DC 20036		1000	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 2775.00	
TOTAL (if last page of this schedule)				\$ 4200.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
Lynne Gentry 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
10/18/06	ID# CK#	Landmark Strategies, Inc. 6225 Brandon Avenue Suite 305 Springfield, VA 22150	telephone voter contact program	\$ 719.40
10/19/06	ID# CK#	Rockwell City Public Library 426 5th Street Rockwell City, IA 50579	room use fee - 5th fund raiser	10.00
10/26/06	ID# CK#	Lake City Graphic 103 N. Center Street Lake City, IA 51449	newspaper ads	60.00
10/26/06	ID# CK#	Calhoun County Journal/Herald PO Box 40 Manson, IA 50563	newspaper ads	42.50
10/26/06	ID# CK#	Dayton Review Box 6 Dayton, IA 50530	newspaper ads	86.00
10/26/06	ID# CK#	KIAQ/KTLB 200 N. 10th Street Fort Dodge, IA 50501	radio ads	766.00
10/26/06	ID# CK#	Jefferson Bee 214 N Wilson Avenue PO Box 440	newspaper ads	67.50
10/26/06	ID# CK#	KWMT/KKEZ 540 A Street Fort Dodge, IA 50501	radio ads	1640.00
SUB-TOTAL				\$ 3391.40
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

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)
Lynne Gentry 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#	Scranton Journal PO Box 187 Scranton, IA 51462	newspaper ads	\$ 30.00
10/31/06	ID# CK#	The Messenger Newspaper 723 Central Avenue Fort Dodge, IA 50501	newspaper ads	523.20
10/31/06	ID# CK#	Clear Channel Radio KWMT 540 A Street Fort Dodge, IA 50501	radio ads	1445.00
10/31/06	ID# CK#	Agents, Inc. 331 Court Street Rockwell City, IA 50579	phone use	25.00
10/31/06	ID# CK#	Three Eagles KTLB 200 N. 10th Street Fort Dodge, IA 50501	radio ads	406.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 2429.20
TOTAL (if last page of this schedule)				\$ 5820.60

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).)

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

Lynne Gentry for Iowa House

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SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> 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
10/26/06	Nathan Gentry 318 Washington Rockwell City, IA 50579	son	paper supplies for fund raiser	\$ 22.74	<input type="checkbox"/>
10/26/06	Dale Gentry 3120 Kingsley Avenue Rockwell City, IA 50579	husband	food for fund raiser	52.09	<input type="checkbox"/>
10/27/06	Chris Brinkman 4024 Hubbell Ave. Des Moines, IA 50318		postage	51.90	<input type="checkbox"/>
10/30/06	Chris Brinkman 4024 Hubbell Ave. Des Moines, IA 50318		postage	24.00	<input type="checkbox"/>
10/31/06	Truman Fund 5661 Fleur Drive Des Moines, IA 50322		contribution	5,533.45	<input type="checkbox"/>
10/31/06	Truman Fund 5661 Fleur Drive Des Moines, IA 50322		contribution	5,533.45	<input type="checkbox"/>
10/31/06	Truman Fund 5661 Fleur Drive Des Moines, IA 50322		contribution	5,533.45	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 16,751.08	
TOTAL (if last page of this schedule)				\$ 16,751.08	

*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.

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)

Lynne Gentry for Iowa House

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		
Mailing Address		
City	State	Zip Code

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From _____ To _____	\$ _____

ESTIMATES OF PERFORMANCE

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

SUB-TOTAL	\$ 0.00
TOTAL (If last page of this schedule)	\$ 0.00