

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	11663
Logged In	<input checked="" type="checkbox"/>
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	

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

Citizens to Elect Griswold

IMPORTANT: Indicate by # type of committee you are reporting for:

(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: John E. Griswold
 Office Sought: State Representative
 Political Party (if applicable): Republican
 District (if Senate or House): 146

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.

John E. Griswold (515)-205-4195 11/02/06
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 11-3-06 Supplemental Disclosure REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by #

- 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.)	\$	1,366.72
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		950.00
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	\$	2,316.72
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....		1,523.25
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).....	\$	793.47
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	0.00
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	101.96
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$	750.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" 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

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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)

Citizens to Elect Griswold

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#	Wyman & Tammy Martinek 1574 - 334th RD. Madrid, IA 50156		\$ 50.00	<input checked="" type="checkbox"/>
10/19/06	ID# CK#	Richard & Marjorie Johnson P.O. Box 111 Sheldahl, IA 50243		50.00	<input checked="" type="checkbox"/>
10/19/06	ID# CK#	Kim & Paul Peters 711 W 8th St. Madrid, IA 50156		100.00	<input checked="" type="checkbox"/>
10/19/06	ID# CK#	Keith Kudje 616 S. Kennedy St. Madrid, IA 50156		50.00	<input checked="" type="checkbox"/>
10/19/06	ID# CK#	Frank & Kay Gallup 626 W. 1st St. Madrid, IA 50156		50.00	<input checked="" type="checkbox"/>
10/19/06	ID# 8445 CK# 6052	Volunteer PAC Dawn Parkinson PO Box 158552 Nashville, TN 38215		500.00	<input type="checkbox"/>
10/26/06	ID# CK#	Jerry Smith 1400 Oriole RD. Boone, IA 50036		50.00	<input type="checkbox"/>
10/19/06	ID# CK#	D. Schmitt 4024 - 65th St. Urbandale, IA 50302		50.00	<input checked="" type="checkbox"/>
10/19/06	ID# CK#	Reuben C. Johnson 708 S. 2nd St. Madrid, IA 50156-1414		30.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$
\$ 950.00

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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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 to Elect Griswold

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
10/19/06	ID# 1663 CK# 1024	Heuss Printing 903 N. 2nd St. Ames, IA 50010	Flyers	\$ 457.90
10/19/06	ID# 1663 CK# 1025	I.S.U. Daily 102 Hamilton Hall Ames, IA 50011	Political Advertisement	150.00
10/21/06	ID# 1663 CK# 1026	Ames Tribune 317 5th St. Ames, IA 50010	Political Advertisement	283.61
10/23/06	ID# 1663 CK# 1027	Madrid Register 102 S. Main St. Madrid, IA 50156	Political Advertisement	50.00
10/25/06	ID# 1663 CK# 1028	Lowe's 120 Airport Rd. Ames, IA 50010	Posts for Signs	37.13
10/26/06	ID# 1663 CK# 1029	Mary Helen's Cookery 1304 Xb Place Boone, IA 50036	Catering Service for Fundraiser	150.00
10/30/06	ID# 1663 CK# 1030	Madrid Register 102 S. Main St Madrid, IA 50156	Political Advertisement	100.00
10/30/06	ID# 1663 CK# 1031	Ames Tribune 317 5th St. Ames, IA 50010	Political Advertisement	283.61
SUB-TOTAL				\$ 1510.25
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)
Citizens to Elect Griswold

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
10/31/06	ID# CK#	Part of ... Madrid ...	Checking account ...	\$ 11.00
	ID# CK#			
SUB-TOTAL				\$ 11.00
TOTAL (if last page of this schedule)				\$ 1523.75

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)
 Citizens to Elect Griswold

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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
10/15/06	John E. Griswold 211 N. Market St. Madrid, IA 50156	Self	U-Pasts for signs	\$ 16.78	<input type="checkbox"/>
10/17/06	John E. Griswold 211 N. Market St. Madrid, IA 50156	Self	Ply-wood for signs	40.77	<input type="checkbox"/>
10/30/06	John E. Griswold 211 N. Market St. Madrid, IA 50156	Self	Flyers	44.41	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	101.96
TOTAL (if last page of this schedule)				\$	101.96

*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.

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens to Elect Griswold

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 750.00

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.)

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

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

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

TOTAL (PART I) \$ 0.00

TOTAL CASH REPAYMENTS (PART II) \$ 0.00

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0.00

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 750.00

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