FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

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

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

CITIZENS FOR SOOTER

NOV 3 2006 PM 11-3

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: TOM SOOTER

Political Party (if applicable): REPUBLICAN

Office Sought: SENATOR

District (if Senate or House): 25

For Office Use Only
Comm. # 1669
Logged In
Scanned
Computer
Audited

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.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 OF PERSON FILING REPORT	TELEPHONE	DATE SIGNED
Deborah Sooter	515-573-2203	11-3-06

I AM FILING A 11-3-06 (report date) REPORT FOR (1) **ELECTION** /(2)**NON-ELECTION** YEAR. 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: 11-7-06

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.) ....$	12,255.54
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	16,329.00
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 ....$	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	19,552.09
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) ....$	9,032.45

****UNPAID BILLS** (From Schedule D - Attach Schedule D) ....$	
***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ....$	1,575.91
****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

SCHEDULE A (Rev 07/03)	MONETARY RECEIPTS
☐ 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 SOOTER

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

CAUTION: Section 68B.32A(6), Iowa Code, 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
10-13-06	ID# CK# 846	LARRY D. SMITH PO BOX 98 TRURO, IA 50257		$ 100.-	
10-17-06	ID# CK# 3078	DAVID HOWREY 316 AUSTIN ROCKWELL CITY, IA 50579		100.-	
10-28-06	ID# 6155 CK# 4543	IOWANS FOR TAX RELIEF PO BOX 209 MUSCATINE, IA 52761-0069		15,000.-	
10-28-06	ID# CK# Cash	JIM HARRIS 2714 N. 25TH ST FORT DODGE, IA 50501		4.-	✓
10-27-06	ID# CK# 12398	ROBERT CRAIGMILE 1405 PARK ST GOWRIE, IA 50543		25.-	✓
10-27-06	ID# CK# 2340	KERMIT DOOLITTLE II PO BOX 1302 FORT DODGE, IA 50501		100.-	✓
10-27-06	ID# CK# 936	DOMENICO MAIORINO 226 N 13TH ST FORT DODGE, IA 50501		50.-	✓
10-28-06	ID# CK# 8733	S.L. PIERCY MD 22831 OLD HIGHWAY 169 FORT DODGE, IA 50501		100.-	✓
10-29-06	ID# CK# 5294	TRENT BOCKOVEN 1213 N 3RD ST FORT DODGE, IA 50501		75.-	✓
10-29-06	ID# CK# 10106	MATT HERMANSON 2749 20TH AVEN FORT DODGE, IA 50501		200.-	✓

SUB-TOTAL $15,754.-

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

☐ 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 SOOTER

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

CAUTION: Section 68B.32A(6), Iowa Code, 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
10-29-06	ID# CK# 2167	JAY DECOSTER 2017 170th ST FORT DODGE, IA 50501		$ 200.-	✓
10-29-06	ID# CK# Cash	JAMES CLARK BOX 542 GRAETTINGER, IA 51342		40.-	✓
10-29-06	ID# CK# 4662	BUCK BOEKELMAN 1239 25th AVE N FORT DODGE, IA 50501		50.-	✓
10-30-06	ID# CK# 1328	CHARLES MEINTIRE 1542 E. IRONWOOD DR. CHANDLER, AZ 85225-1610		25.-	✓
10-30-06	ID# CK# 1024	MARGE BANDY 4040 N. BRIGHTON AVE KANSAS CITY, MO 64117		25.-	✓
10-30-06	ID# CK# 5926	FRANK HARMON 4104 NE 83rd ST KANSAS CITY, MO 64119		50.-	✓
10-30-06	ID# CK# 6645	BRIAN WELCH M.D. 1744 RATHERMEL DR FORT DODGE, IA 50501		100.-	✓
10-30-06	ID# CK# 2810	MRS. LAYCOCK P.O. BOX 5 FARNHAMVILLE, IA 50538		15.	✓
10-30-06	ID# CK# 2927	TOM LATHAM PO BOX 53 RAWSON, OH 45881		25.-	✓
10-26-06	ID# CK# Cash	UNITEMIZED RECEIPTS FROM THE PASS THE HAT COLLECTION		45.-	

SUB-TOTAL $ 575.-

TOTAL *(if last page of this schedule)* $ 16,329.-

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE B (Rev 07/03)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)*

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
10-17-06	ID# CK# 176	TRULY GARDNER PO BOX 32 BARNUM, IA 50518	VOLUNTEER - CAMPAIGN PAY	$125.-
10-17-06	ID# CK# 177	DUSTY MARTYN 150 E. PLESANT ROCKWELL CITY, IA 50579	VOLUNTEER PAY	23.-
10-18-06	ID# CK# 178	DUSTY MARTYN 150 E. PLESANT ROCKWELL CITY, IA 50579	VOLUNTEER PAY	29.-
10-21-06	ID# CK# 179	WALMART 3036 1ST AVE S FORT DODGE, IA 50501	SNACKS FOR VOLUNTEERS	23.28
10-21-06	ID# CK# 180	OP PRINTING 2610 PARK AVE MUSCATINE, IA 52761	11x17 BROCHURES	1,267.87
10-22-06	ID# CK# 181	TRULY GARDNER PO BOX 32 BARNUM, IA 50518	VOLUNTEER - CAMPAIGN PAY	125.-
10-23-06	ID# CK# 182	POST OFFICE 205 S 8th ST FORT DODGE, IA 50501	STAMPS	3.69
10-24-06	ID# CK# 183	MESSENGER 713 CENTRAL AVE FORT DODGE, IA 50501	ADVERTISING	174.40
			SUB-TOTAL	$1771.24
			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

SCHEDULE B (Rev 07/03)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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 SOOTER

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
10-27-06	ID# CK# 184	VICTORY ENTERPRISES 5200 SW 30TH ST STE. 7 DAVENPORT, IA 52802	CABLE BUY - PRODUCTION SHIPPING - TAPE	$ 9,654.50
10-27-06	ID# CK# 185	VICTORY ENTERPRISES 5200 SW 30TH ST STE. 7 DAVENPORT, IA 52802	RADIO BUY - PRODUCTION SHIPPING	7,331.85
11-2-06	ID# CK# 186	WALMART 3036 1ST AVE S FORT DODGE, IA 50501	PRINT CARTRIDGE - ENVELOPES	40.11
11-2-06	ID# CK# 187	BEE-HERALD PUBLICATIONS 214 N. WILSON JEFFERSON, IA 50129	ADVERTISING	94.80
11-2-06	ID# CK# 189	VICTORY ENTERPRISES 5200 SW 30TH ST STE. 7 DAVENPORT, IA 52802	ADVERTISING	2.60
11-3-06	ID# CK# 190	TRULY GARDNER PO BOX 32 BARNUM, IA 50518	VOLUNTEER/CAMPAIGN PAY	250.-
11-3-06	ID# CK# 191	OFFICE MAX 2950 5TH AVE S FORT DODGE, IA 50501	OFFICE SUPPLIES FOR MAILING	211.99
11-3-06	ID# CK# 192	FORT DODGE POST OFFICE 205 S. 8TH FORT DODGE, IA 50501	STAMPS FOR MAILING	195.-
			SUB-TOTAL	$17,780.85
			TOTAL *(if last page of this schedule)*	$19,552.09

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 Schedule B)

FOR INSTRUCTIONS. SEE BACK OF FORM

COMMITTEE NAME *(Must be same as on Statement of Organization)*
CITIZENS FOR SOOTER

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS

☐ 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
10-27-06	REPUBLICAN PARTY OF IOWA 621 E. 9TH DES MOINES, IA 50309		PRINT & MAIL POSTCARDS	$ 1,575.91	☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
			SUB-TOTAL	$ 1,575.91	
			TOTAL (if last page of this schedule)	$ 1,575.91	

*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.

11-3-06

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
☒ CHECK THIS BOX IF AMENDING FORM	

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

CITIZENS FOR SOOTER

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
PERIOD 10-15-06 Thru 12-31-06 11-3-06 period	TOM SOOTER 5145 LAKESIDE LN. MANSON, IA 50563 OLD ADDRESS 1906 6th AVE. N. FORT DODGE, IA 50563	MILEAGE REIMBERSMENT @ 44.5	$ 464.58
PERIOD 10-15-06 Thru 12-31-06	TOM SOOTER 5145 LAKESIDE LN. MANSON, IA 50563 OLD ADDRESS 1906 6th AVE N. FORT DODGE, IA 50563	POSTAGE REIMBERSMENT	15.60
5-19-06 PERIOD	"	mileage	955.47
5-19-06 period	"	postage	495.58
7-19-06 period	"	mileage	585.63
	"	postage	2.07
10-19-06 period	"	mileage	1843.63
"	"	postage	39.00
		SUB-TOTAL	$
		TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD	$ 480.18

s/b 4401.50

2007 DEC 17 AM 9:20 IA ETHICS AND CAMPAIGN DISCLOSURE BD

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1 (for Schedule D)

CANDIDATE COMMITTEES NOTE:
*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.