

**Reset Form**

**DISCLOSURE SUMMARY PAGE**

<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1647
Logged In	SW
Scanned	SW
Computer	Fax
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

Smth for State 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

**CANDIDATE COMMITTEES ONLY**

Candidate Name Roby Smith	Political Party (if applicable) Republican
Office Sought State Representative	District (if Senate or House) 85

**IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD**

JUN - 5 2006

FILED faxed b-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.

Roby Smith 563-386-0179 5-31-06  
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A May 30, 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.) .....\$ 2,224.73

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)..... 1,425.00

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** .....\$ 3,649.73

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)..... 1,033.51

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).....\$ 2,616.22

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\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) .....\$ \_\_\_\_\_

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....\$ 110.00

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) .....\$ 500.00

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

**DISCLOSURE SUMMARY PAGE**

FORM <b>DR-2</b> (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Control #	1647
Typed	SW
Signed	
Computer	
Accepted	
File with Iowa Ethics and Campaign Disclosure Board 510 E 12th St. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

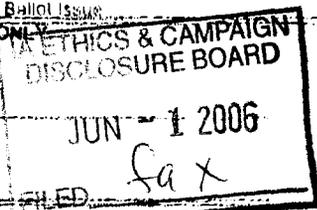
COMMITTEE NAME (Must be same as on Statement of Organization)

Smith for State House

IMPORTANT: Indicate by # type of committee you are reporting for:  (1) Statewide/legislative/Judge Standing for Retention Candidates;  (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) PAC;  (10) School Board or Other Political Subdivision PAC;  (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY

Candidate Name: Reby Smith  
Office Sought: State Representative  
Political Party (if applicable): Republican  
District (if Senator or House): S5



Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A, 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: *Reby Smith* TELEPHONE: 563 386-0179 DATE SIGNED: 5-31-06

I AM FILING A: May 30, 2006 REPORT FOR: 1 ELECTION / 2 NON-ELECTION YEAR

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.)

**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 <b>MUST</b> 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)	\$	2,224.74
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A - Cash Contributions total (Attach Schedule A) (also see in Key to forms)		1425.-
Schedule E - Loans Received total (Attach Schedule E)		
Schedule H - Total Sales of Campaign Property (Attach Schedule H)		
<u>(Schedule H applies to Candidates' Committees Only)</u>		
<b>SUB-TOTAL</b>	\$	3,649.74
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B - Expenditures total (Attach Schedule B) (also see debits and credits below)		1,033.-
Schedule F - Loan Repayments total (Attach Schedule F)		
CASH ON HAND at the end of this reporting period (final report balance must be zero) (Attach DR-3)	\$	2,616.74

\*UNPAID BILLS (From Schedule D - Attach Schedule D) \$

\*IN KIND CONTRIBUTIONS (From Schedule E) - Attach Schedule E \$ 100.00

\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 500.00

CONSULTANT BREAKDOWN (Schedule C Attached) YES  NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule G - Attach Schedule H) \$

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 <b>A</b> (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)  
Smith for State 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
05/15/06	ID# CK#	Kay Berry 2418 Wilkes Avenue Davenport, IA 52806		\$25.00	<input type="checkbox"/>
05/15/06	ID# CK#	Connie Wilkes 124 Foxfire Pl Rockton, IL 61072		\$25.00	<input type="checkbox"/>
05/16/06	ID# CK#	Gloria Streiter 3918 14th Street Rock Island, IL 61201		\$25.00	<input type="checkbox"/>
05/17/06	ID# CK#	Lori Hughes 6144 Fair Ave Davenport, IA 52806		\$25.00	<input type="checkbox"/>
05/17/06	ID# CK#	Maurita Voss 5903 Kimberly Rd Davenport, IA 52806		\$25.00	<input type="checkbox"/>
05/17/06	ID# CK#	Daniel and Susan Kaufmann 129 Forest Rd Davenport, IA 52803		\$100.00	<input type="checkbox"/>
05/18/06	ID# CK#	David Quist 4128 Lillie Ave Davenport, IA 52806		\$25.00	<input type="checkbox"/>
05/18/06	ID# CK#	Patrick Creedon 886 E Hickory Street Eldridge, IA 52748		\$100.00	<input type="checkbox"/>
05/19/06	ID# CK#	John Larson 9348 W 67th Ave Arvada, CO 80004		\$25.00	<input type="checkbox"/>
05/21/06	ID# CK#	Timothy and Tracy Dunn 601 S 9th Ave Eldridge, IA 52748		\$250.00	<input type="checkbox"/>
SUB-TOTAL				\$ 625.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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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<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)

Smith for State 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
05/22/06	ID# CK#	Mark and Heidi Iltis 2618 N Fillmore St Davenport, IA 52804		\$250.00	<input type="checkbox"/>
05/22/06	ID# CK#	Gary Blunck 2591 E George Washington Blvd Davenport, IA 52803		\$25.00	<input type="checkbox"/>
05/23/06	ID# CK#	Linda Gaster 5280 Crestview Heights Dr Bettendorf, IA 52722		\$25.00	<input type="checkbox"/>
05/23/06	ID# CK#	Paul Mullin 1357 Meadowview Ln Davenport, IA 52806		\$50.00	<input type="checkbox"/>
05/25/06	ID# CK#	Arnold and Shirley Marolf 2838 Kelling St Davenport, IA 52804		\$50.00	<input type="checkbox"/>
05/27/06	ID# CK#	Shana Schindler 2719 E 53rd St Davenport, IA 52807		\$25.00	<input type="checkbox"/>
05/27/06	ID# CK#	Mona Martin 1504 W 29th St Davenport, IA 52804		\$50.00	<input type="checkbox"/>
05/27/06	ID# CK#	Marjorie Kimmel 40 Kenwood Ave Davenport, IA 52803		\$200.00	<input type="checkbox"/>
05/27/06	ID# CK#	Dean and Debra Guyette 4331 Wittmann Dr Davenport, IA 52806		\$25.00	<input type="checkbox"/>
05/27/06	ID# CK#	Mark Redeker 5170 Coachman Ct Davenport, IA 52722		\$100.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 800.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 1425.00	

\* 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**

**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.

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
Smith for State House

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE <i>(Disbursement)</i> WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05/16/06	ID# CK#	Wal-Mart 3101 W Kimberly Rd Davenport, IA 52806	Pictures	\$ 10.55
05/18/06	ID# CK#	Vicory Enterprises 5200 SW 30th Davenport, IA 52802	Yard Signs	\$883.29
05/19/04	ID# CK#	Office Max 320 W Kimberly Rd Davenport, IA 52806	Paper	\$12.84
05/22/04	ID# CK#	Farm and Fleet 8535 Northwest Blvd Davenport, IA 52806	Post	\$91.57
05/22/06	ID# CK#	Wal-Mart 3101 W Kimberly Rd Davenport, IA 52806	Drinks for Volunteers	\$10.66
05/25/06	ID# CK#	Farm and Fleet 8535 Northwest Blvd Davenport, IA 52806	Post	\$24.60
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 1033.51</b>

**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

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

Smith for State House

**Reset Form**

<b>SCHEDULE</b> <b>E</b> (Rev. 06/97)	<b>IN-KIND</b> <b>CONTRIBUTIONS</b>
<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
05/15/06	Republican Party of Iowa 621 E 9th Des Moines, IA 50309		Letter	\$ 110.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$	
<b>TOTAL (If last page of this schedule)</b>				\$ 110.00	

\*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

Reset Form

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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Smith for State House

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

**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD** \$ 500.00

**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.)

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
			\$

TOTAL CASH REPAYMENTS (PART II) \$ \_\_\_\_\_

From Schedule E - TOTAL LOANS FORGIVEN \$ \_\_\_\_\_

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 500.00

\*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 when it applies.