FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

| FORM DR-2 (Rev. 01/98) | DISCLOSURE REPORT |
|---|---|

For Office Use Only
Comm # 57
Indexed S
Audited
Computer

COMMITTEE NAME (Must be same as on Statement of Organization) PM 1-14 57
REELECTION of WALLY HORN COMMITTEE

IMPORTANT: Indicate type of committee you are reporting for: [1]

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
(8) Support Slate of Candidates

Larry [signature] 319-365-2182 01-11-07

SIGNATURE OF TREASURER (or person filing this report) TELEPHONE DATE SIGNED

**Routine Penalties Due For Late Filed Reports Range from $20 to $800**

**SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**

I AM FILING A JAN 19 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.
(report date) Indicate one [ ]

[ ] 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 Notice of Dissolution 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. (This is the total of all monies 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.) ..... $ 7,023.98

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) ..... 3,425.00

Schedule F: Loans Received total (Attach Schedule F) ..... Ø

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... Ø

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....$ 10,448.98

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) ..... 9,542.70

Schedule F: Loan Repayments total (Attach Schedule F) ..... Ø

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... $ 906.28

UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $ Ø

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) $ Ø

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) $ Ø

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ___ YES ✓ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ 99.00

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)* 57

REELECTION of WALLY HORN COMMITTEE

**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 |
|---|---|---|---|---|---|
| 01-04-07 | ID# CK# 2239 | COCA-COLA ENTERPRISES, INC<br>PO BOX 723040<br>ATLANTA, GA 31139-0040 | | $ 500.00 | ☐ |
| 01-04-07 | ID# 6078 CK# 1648 | IA PHYSICAL THERAPY PAC<br>1228-8TH ST STE 106<br>WEST DES MOINES, IA 50265 | | 100.00 | ☐ |
| 05-10-07 | ID# CK# | B.J. TRICKY<br>2020 SCOTTY DR. S.W.<br>CR, IA 52404 | | 500.00 | ☐ |
| 07-25-07 | ID# CK# | CLOYD ROBINSON<br>404 CHERRY HILL RD SW<br>CR, IA 52404 | | 1,000.00 | ☐ |
| 07-25-07 | ID# CK# | PAT GIORGIO<br>335 SHONEY CREEK RD NW<br>CR, IA 52405 | | 150.00 | ☐ |
| 07-25-07 | ID# CK# | LANNY WARD<br>200 CLIVE DR SW<br>CR, IA 52404-1324 | | 25.00 | ☐ |
| 07-25-07 | ID# CK# | STEVE ACKERSON<br>1634 NW 131ST ST<br>CLIVE, IA 50325 | | 100.00 | ☐ |
| 07-26-07 | ID# 6087 CK# 3673 | IA HEALTH PAC<br>6750 WESTERN PKWY #100<br>WEST DES MOINES, IA 50266 | | 200.00 | ☐ |
| 09-09-07 | ID# 6098 CK# | IA BEV PAC<br>8717 NORTHWEST BLVD<br>DAVENPORT, IA 52809 | | 500.00 | ☐ |
| 12-15-07 | ID# 6058 CK# 4110 | IOWA CHIROPRACTIC SOCIETY - PAC<br>1605 N. ANKENY BLVD, SUITE 100<br>ANKENY, IA 50023-4163 | | 100.00 | ☐ |

SUB-TOTAL $ 3,175.00

**TOTAL** ***(if last page of this schedule)*** $ ~~3,175.00~~

* 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

| 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)*

Reelection of Wally Horn Committee 57

**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 |
|---|---|---|---|---|---|
| 12-10-07 | ID# CK# 3882 | UNION PACIFIC FUND FOR EFFECTIVE 600-13TH ST NW SUITE 340/604 WASHINGTON DC 2005 | | $ 250.00 | ☐ |
| | ID# CK# | | | | ☐ |
| | ID# CK# | | | | ☐ |
| | ID# CK# | | | | ☐ |
| | ID# CK# | | | | ☐ |
| | ID# CK# | | | | ☐ |
| | ID# CK# | | | | ☐ |
| | ID# CK# | | | | ☐ |
| | ID# CK# | | | | ☐ |
| | ID# CK# | | | | ☐ |
| | | | SUB-TOTAL | $ 250 | |
| | | | **TOTAL** ***(if last page of this schedule)*** | $ 3,425 | |

* 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 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)*
RELECTION OF WALLY HORN COMMITTEE 57

| 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 |
|---|---|---|---|---|
| 01-05-07 | ID# CK# 648 | WALLY HORN 101 STONEY PT Rd SW CR, IA 52404 | REIMBURSEMENT FOR TRANSPORTATION, LODGING & REGISTRATION TO SGAC MTG IN SANTA BARBARA, CA & CSG MTG IN PHOENIX, AZ | $2,516.42 |
| 1-13-07 | ID# CK# 649 | LINN Co. DEMOCRATS CEDAR RAPIDS, IA 52406 | CONTRIBUTION | 1,000.00 |
| 2-10-07 | ID# CK# 650 | GAZETTE COMMUNICATIONS 500-3rd AVE SE CR, IA 52405 | SURVEY IN THE CEDAR RAPIDS GAZETTE | 494.57 |
| 6-26-07 | ID# CK# 651 | WALLY HORN 101 STONEY PT Rd SW CR, IA 52404 | GAZETTE SURVEY & RESULTS REIMBURSEMENT | 496.07 |
| 6-26-07 | ID# CK# 651 | " | CAMPAIGN RELATED EXPENSES REIMBURSEMENT | 615.90 |
| 6-26-07 | ID# CK# 651 | " | REIMBURSEMENT FOR TRANSPORTATION & LODGING FOR NCSL MTG IN MADISON, WI | 307.31 |
| 6-26-07 | ID# CK# 651 | " | REIMBURSEMENT FOR TRANSPORTATION LODGING & REGISTRATION FOR CSG MTG IN LAS CROABAS, PUERTO RICO | 1,761.76 |
| 6-26-07 | ID# CK# 651 | " | AD IN THE HAWKEYE LABOR PROGRAM | 75.00 |

SUB-TOTAL $ 7267.03

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)* 57

REELECTION OF WALLY HOAN COMMITTEE

| 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 |
|---|---|---|---|---|
| 09-12-07 | ID# CK# 952 | WALLY HOAN 101 STONEY PT RD SW CR, IA 52404 | REIMBURSENT FOR LODGING, TRANSPORTATION AND REGISTATION TO MIDWEST LEGISLATIVE CONFERENCE IN TRAVERSE CITY, MI | $ 985.40 |
| 09-12-07 | ID# CK# 952 | " | REIMBURSMENT FOR LODGING, AND TRANSPORTATION TO AMERICAN LEGISLATIVE EXCHANGE COUNCIL IN PHILADELPHIA, PA | 1,142.47 |
| 11-05-07 | ID# CK# | JULIE SIMON 1026 EAST 9TH ST DM, IA 50316-2910 | REIMBURSEMENT FOR POSTAGE USED FOR MISC. MAILINGS | 147.80 |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | | | SUB-TOTAL | $ 2275.67 |
| | | | **TOTAL** ***(if last page of this schedule)*** | $ 9542.70 |

**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*

***THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY***

| SCHEDULE H (Rev. 07/03) | CAMPAIGN PROPERTY |
|---|---|

**ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.**

☐ CHECK THIS BOX IF AMENDING FORM

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*
Reelection of Wally Horn Committee 57

**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

| Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR) | Description of Property | Purchase Price or Est. Value When Acquired* | Current Value at Fair Market This Report |
|---|---|---|---|
| 10-14-06 | FAX MACHINE | $369 | $99 |
| | | | |
| | | | |
| | | | |
| | | | |

**PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY ****

| Date (MM/DD/YR) | Name and Address of Purchaser/Donee | Description of Property | Sold? Y/N | Sale Price | Value of Donation |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) $ 99.00

** PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) $ _____

TOTALS $ _____ $ _____

* If estimated, show ***est.*** beside figure.

(Attach Additional Schedules if Needed)

Page _____ of _____ Pages
(For Schedule H)