

FOR INSTRUCTIONS, SEE BACK OF FORM

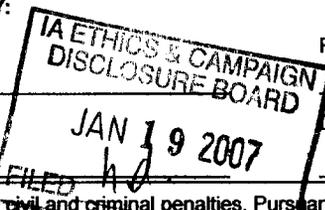
Reset Form

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis Black for State Senate

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: Dennis H. Black
Political Party (if applicable): Democrat
Office Sought: State Senate
District (if Senate or House): SD 21



FORM DR-2 (Rev. 12/2005) DISCLOSURE REPORT
For Office Use Only
Comm. # 7
Logged In S e
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: [Signature] TELEPHONE: 515-975-8608 DATE SIGNED: 1-19-07

I AM FILING A January 19, 2007 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

Table with 2 columns: Description and Amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$15,188.78), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 4,825.00), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: 8,394.95), CASH ON HAND at the end of this reporting period (\$11,618.83).

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 9,212.18
\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 3,215.26
\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$

CONSULTANT BREAKDOWN (Schedule G Attached?) YES [checked] 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 <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)  
Dennis Black for State Senate

**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/YY)	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
11-10-06	ID# CK# 6723	Maurice Phillips 1109 E. 16th St. S. Newton, IA. 50208		\$50	<input type="checkbox"/>
11-30-06	ID# 6063 CK# 2114	Iowa Dental Association PAC 5530 W. Parkway, Ste. 100 Johnston, IA. 50131		500	<input type="checkbox"/>
11-30-06	ID# 6433 CK# 486	Alliant Energy PAC 4902 N. Biltmore Ln., Box 77007 Madison, Wisconsin 53703		500	<input type="checkbox"/>
12-20-06	ID# 6078 CK# 164	Iowa Physical Therapy, PAC 1228 8th St., Ste. 106 W. Des Moines, IA. 50265		100	<input type="checkbox"/>
12-20-06	ID# CK# 1019	Rick Avery 918 Reuel Ave. Kellogg, IA. 50135		25	<input type="checkbox"/>
11-01-06	ID# CK# 2016	Keeping Americals Promise, Inc. 607 14th St. NW, Ste. 800 Washington, D. C. 20005		2,500	<input type="checkbox"/>
11-02-06	ID# CK# 2364	Don Brazelton 1510 Trilein Dr. Ankeny, IA. 50021		50	<input type="checkbox"/>
11-03-06	ID# CK# 3050	Todd Herren 4400 EP True Parkway #18 West Des Moines, IA. 50265		100	<input type="checkbox"/>
11-03-06	ID# CK# 5741	Celeste Herbold 9345 N. 51st Ave. W. Colfax, IA. 50054		50	<input type="checkbox"/>
11-05-06	ID# CK# 1089	Brian D. Smith 2106 N. 4th Ave. E. Newton, IA. 50208		250	<input type="checkbox"/>
SUB-TOTAL				\$ 4,125	
<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

Reset Form

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)  
Dennis Black for State Senate

**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
11-03-06	ID# CK# 2558	Corey J. L. Walker 3768 Harbor Avenue Newton, IA. 50208		\$250	<input type="checkbox"/>
11-05-06	ID# 6237 CK# 1944	ABATEPAC 3118 Eastern Ave., NE Cedar Rapids, IA. 52402		250	<input type="checkbox"/>
11-05-06	ID# CK# 1908	Don Avenson 30 Maplewood Drive Oelwein, IA. 50662		200	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL	\$ 700
<b>TOTAL (if last page of this schedule)</b>	\$ 4,825

\* 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

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
Dennis Black for State Senate

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
11-1-06	ID# CK# 2247	Prairie City News Box 249 Prairie City, IA. 50228	Political advertising	\$ 421.20
11-1-06	ID# CK# 2248	U. S. Cellular Box 7835 Madison, WI. 53707	Cellular telephone	148.85
11-5-06	ID# CK# 2249	Lynnville Fire Dept. Fire Station Lynnville, IA. 50153	Donation for advertising	100
11-7-06	ID# CK# 2250	Jasper County Tribune Box 7 Colfax, IA. 50054	Political advertising	682.50
11-11-06	ID# CK# 2252	InteractDev PC Development 9390 Lakewood Dr. Norwalk, IA.	Photography, computer services and website development	3,012.65
11-18-06	ID# CK# 2253	Stewart AutoPerformance Engineering 34420 Ute Ave. Waukee, IA. 50263	Lease of Ford pick-up truck, for use during campaign. Insurance included. Seven months lease.	1,200
11-18-06	ID# CK# 2254	Prairie City Fire Department Fire Department Prairie City, IA. 50228	Donation for advertising	50
11-18-06	ID# CK# 2255	Steven Black 3124 8th St. Des Moines, IA. 50317	Contract services. Wood sign const., coordinator of sign, telephone and brochure and leaflet campaign.	1,433
<b>SUB-TOTAL</b>				<b>\$ 7,048.20</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$</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

**Reset 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.

<b>SCHEDULE 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)*  
Dennis Black for State Senate

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
11-25-06	ID# CK# 2256	Anne Burnett 9390 Lakewood Norwalk, IA. 50211	Capaign Administrative Assistant. Coordinated speaking engagements, voter I.D., personal mailings, etc.	\$ 1,085
11-25-06	ID# CK# 2257	Eric Baker 300 Walnut, #114 Des Moines, IA. 50309	Reimbursement for expenses rendered in coordinated door knocking event.	49.51
12-14-06	ID# CK# 2293	Newton Daily News 100 First Avenue East Newton, IA. 50208	Political advertising	150.40
During 2006	ID# CK# None	U. S. Bank, Newton Office PO Box 790179 St. Louis, MO. 63179	Banking fees, 2006	61.84
	ID# CK#			
<b>SUB-TOTAL</b>				\$ 1,346.75
<b>TOTAL (if last page of this schedule)</b>				\$ 8,394.95

**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)  
 Dennis Black for State Senate

**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

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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.

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*
To date	Dennis Black 5239 E. 156 St. S. Grinnell, IA. 50112	As per attached	\$ 9,212.18
SUB-TOTAL			\$ 9,212.18
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			\$ 9,212.18

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

**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.

**Attachment to Schedule D  
Report of January 19, 2007**

**Senator Dennis Black  
5239 E. 156 St. S.  
Grinnell, IA. 50208**

Encumbrance as per Schedule D itemization, report of Nov. 1, 2006:	\$8,401.37
Mileage, Nov. 1 – Dec. 31, 2006: 1,684 mi. @ \$.35/mi:	589.40
Computer monitor, printing, postage, paper, with receipts on file:	221.41
<b>Total encumbrance to D. Black, through Dec. 31, 2006:</b>	<b>\$9,212.18</b>

