

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1607
Logged In	S
Scanned	
Computer	
Audited	

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

JAY CHRISTENSEN - SZALANSKI WORKS FOR IOWA

IMPORTANT: Indicate by # type of committee you are reporting for: 3  
 (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: JAY CHRISTENSEN-SZALANSKI Political Party (if applicable): INDEPENDENT  
 Office Sought: IOWA STATE SENATE District (if Senate or House): 39

Late reports are subject to possible civil and criminal penalties.

[Signature]  
SIGNATURE OF PERSON FILING REPORT

319-338-7551  
TELEPHONE

Jan. 16, 2007  
DATE SIGNED

I AM FILING A JANUARY 19, 2007  
(report date)

FILED FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
 I AM FILING FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
 Indicate by # 1  
 JAN 18 2007  
 FILED FAX

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  
NOV. 7, 2006  
 County & Local Committees, enter County in which Election is held  
JOHNSON

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.)	\$	<u>823.84</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>355.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>2382.40</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0</u>
<b>(Schedule H applies to Candidates' Committees Only)</b>		
	SUB-TOTAL .....	\$ <u>3561.24</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>2747.68</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>813.56</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>0</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>3664.04</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
<b>CANDIDATE COMMITTEES ONLY:</b>		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<u>N/A</u>
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0</u>

YES  NO

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**  
(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
**JAY CHRISTENSEN - SZALANSKI WORKS FOR IOWA**

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

**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
10/27/06	ID# CK#	ROGER K. WADDELL 1006 5th ST., STE. 102 CORALVILLE, IA 52241	NONE	\$ 20.	<input type="checkbox"/>
11/05/06	ID# CK#	DENNIS SCHRAG 3 LONGVIEW KNOLL IOWA CITY, IA 52240	"	100.	<input type="checkbox"/>
10/25/06	ID# CK#	THOMAS E. & KATHERINE A. LYNCH 1641 QUINCENT IOWA CITY, IA 52245	"	35.	<input type="checkbox"/>
10/25/06	ID# CK#	WILLIS M. & LINDA ANN BYWATER 621 S. SUMMIT ST. IOWA CITY, IA 52240	"	150.	<input type="checkbox"/>
10/25/06	ID# CK#	KENT & MARLENE SWAIM 6 HICKORY RIDGE LANE NE IOWA CITY, IA 52240	"	50	<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 \$ 355.  
TOTAL (if last page of this schedule) \$ 355.

\* 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

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)

JAY CHRISTENSEN-SZALANSKI WORKS FOR IOWA

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#	PRESS CITIZEN 1725 N. DODGE ST. IOWA CITY, IA 52245	ADVERTISING	\$ 1506.45
11/1/06	ID# CK#	DAILY IOWAN 111 COMMUNICATIONS CTR. 140 WASHINGTON ST IOWA CITY, IA 52242	"	875.95
11/15/06	ID# CK#	LESS REFUND OF OVERCHARGE FROM BANKERS ADVERTISING BILL (ORIGINALLY #1096) PD. ON 9/19/06 & NOTED ON OCT 19, 2006 REPT		(139.66)
10/26/06	ID# CK#	TECHNOGRAPHICS PEDISTRIAN MALL PLAZA CENTRE ONE IOWA CITY, IA 52240	PRINTING /MAILING	504.94
	ID# CK#			
SUB-TOTAL				\$ 2747.68
TOTAL (if last page of this schedule)				\$ 2747.68

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)  
**JAY CHRISTENSEN-SZALANSKI WORKS FOR IOWA**

SCHEDULE <b>E</b> (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
10/19/06	RON MCCLELLAN 813 RUNDALL ST. IOWA CITY, IA 52240	NONE	GRAPHIC DESIGN	\$ 500.	<input type="checkbox"/>
1/08/07	JAY CHRISTENSEN-SZALANSKI 1 HICKORY RIDGE LN NE IOWA CITY, IA 52240	SAME	LOAN FORGIVENESS	3164.84	<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"/>

SUB-TOTAL \$ 3664.84  
 TOTAL (if last page of this schedule) \$ 3664.84

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.

Reset Form

SCHEDULE <b>F</b> (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)  
**JAY CHRISTENSEN-SZALANSKI WORKS FOR IOWA**

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1596.

**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/YYR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT OF LOAN
11/1/06	JAY CHRISTENSEN-SZALANSKI 1 HICKORY RIDGE LN NE IOWA CITY, IA 52240	SAME	\$ 1506.45
11/1/06	"	"	875.95

DATE PAID (MM/DD/YYR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT REPAID
1/16/07	JAY CHRISTENSEN-SZALANSKI 1 HICKORY RIDGE LN NE IOWA CITY, IA 52240	SAME	\$ 673.90
1/8/01	"	"	139.66

TOTAL (PART I) \$ 2382.40  
 UNPAID FROM ABOVE 1596.00  
 TOTAL LOANS 3978.40

TOTAL CASH REPAYMENTS (PART II) \$ 813.56  
 From Schedule E -- TOTAL LOANS FORGIVEN \$ 3164.84  
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0

\*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.

JAN-18-2007 16:06  
 LEFF LAW FIRM LLP  
 319 338 6902  
 P. 05

# Notice of Dissolution

FORM

(Rev. 07/03)

## DR-3 NOTICE OF DISSOLUTION

**Mail to:**

IECDB  
510 East 12<sup>th</sup>, Suite 1A  
Des Moines, Iowa 50319

**For Office Use Only**

Comm. # 1607  
Indexed \_\_\_\_\_  
Audited \_\_\_\_\_  
Computer DP  
Certified Date of Dissolution \_\_\_\_\_

IA ETHICS & CAMPAIGN  
DISCLOSURE BOARD

JAN 18 2007  
FAX

COMMITTEE NAME

JAY CHRISTENSEN-SZALANSKI WORKS FOR IOWA

Official Name of Committee

C/O R. BRUCE HAUPERT, TREAS.

Street

BOX 2447, 222 S. LINN ST., IOWA CITY, IA 52244

City, State, Zip Code

(319) 338-7551

Area Telephone  
Code

**WHEN TO FILE:**

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

18 Jan 07

Date Signed

**FOR INSTRUCTIONS, SEE BACK OF FORM**

This form is not applicable to statutory political committees.