

(1)

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>727</u>	
Logged In <u>SW</u>	
Scanned _____	
Computer _____	
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

Jack Drake for State Representative

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 _____ Political Party (if applicable) _____

Office Sought _____ District (if Senate or House) _____

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.

Shirley J. Drake
SIGNATURE OF PERSON FILING REPORT

712-784-3535
TELEPHONE

1-19-07
DATE SIGNED

I AM FILING A _____ (report date) REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR. Indicate by #

- 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.)

FILED
JAN 15 2007
faj

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.)	\$	<u>6,069.17</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>278.60</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>—</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>—</u>
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	<u>6,347.77</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>1,340.17</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>—</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>5,007.60</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>None</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>75.00</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>—</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES <input checked="" type="checkbox"/> NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>None</u>
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.		

2

For Instructions, See Back of Form

Reset Form

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

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

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

Jack Drake for State Representative

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
10-31-06	ID# CK#	<i>Rolling Hills Bank Box 588 Walnut, IA. 51577</i>		\$ <i>1.23</i>	<input type="checkbox"/>
11-2-06	ID# CK#	<i>Mrs Emery Hoegh 1503 Redwood Dr. Atlantic, IA. 50022</i>		<i>25.00</i>	<input type="checkbox"/>
11-4-06	ID# CK#	<i>Koch PAC 655-15th St. NW STE. 445 Washington DC 20005</i>		<i>250.00</i>	<input type="checkbox"/>
11-30-06	ID# CK#	<i>Rolling Hills Bank Box 588 Walnut IA. 51577</i>		<i>1.24</i>	<input type="checkbox"/>
12-31-06	ID# CK#	<i>Rolling Hills Bank Box 588 Walnut IA. 51577</i>		<i>1.13</i>	<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				<i>\$78.60</i>	
TOTAL (if last page of this schedule)				<i>\$278.60</i>	

* 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.

3

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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.

SCHEDULE 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)
Jack Drake for State Representative

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
11-3-06	ID# CK# 1194	Griswold American P.O. Box 430 Griswold, IA. 51535	Campaign Ad	\$ 89.25
11-5-06	ID# CK# 1195	Harlan Band Parents 2102 Durant Harlan, IA. 51537	Campaign meals	18.00
11-7-06	ID# CK# 1196	Harlan Newspapers Box 721 Harlan, IA. 51537	Campaign ad	231.00
11-7-06	ID# CK# 1197	Atlantic Methodist youth 800 Poplar Atlantic, IA. 50022	Campaign meals	10.00
11-15-06	ID# CK# 1198	Verizon Cell Phone 777 Big Timber Rd. Elgin, IL. 60123	Cell Phone for campaign	28.77
11-20-06	ID# CK# 1199	Griswold American P.O. Box 430 Griswold, IA. 51535	Thank you ad	34.00
11-21-06	ID# CK# 1200	Atlantic Newstelegraph Box 230 Atlantic, IA. 50022	Thank you ad	73.60
11-21-06	ID# CK# 1201	Walnut Bureau Box 468 Walnut, IA. 51577	Campaign ad and Thank you ad	117.20
SUB-TOTAL				\$ 601.77
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).)

4

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Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
Jack Drake for State Representative

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
12-2-06	ID# CK# 1202	Danish Village Voice Box 10 EIK Horn, IA. 51531	1 year Subscription Campaign ad Thank you ad	\$ 150.00
12-2-06	ID# CK# 1203	Journal Herald Box 308 Avoca, IA. 51521	2 year Subscription Campaign ad Thank you ad	256.00
12-6-06	ID# CK# 1204	K JAN Box 389 Atlantic, IA. 50022	Sponsor Christmas ad	60.00
12-6-06	ID# CK# 1205	Harlan Newspaper Box 721 Harlan, IA. 51537	Thank you ad	58.00
12-19-06	ID# CK# 1206	Jack Drake 52462 Juniper Rd. Lewis, IA. 51544	536 Campaign Cat @ .40	214.40
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 738.40
TOTAL (if last page of this schedule)				\$ 1340.17

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).)

