

Notice of Dissolution

Reset Form

Mail to:
IECDB
510 East 12th, Suite 1A
Des Moines, Iowa 50319

FORM

(Rev. 07/03)

DR-3 NOTICE OF DISSOLUTION

For Office Use Only

Comm. # 1689
Indexed _____
Audited _____
Computer DB
Certified Date of Dissolution _____

COMMITTEE NAME

LIVINGSTON FOR SENATE	
Official Name of Committee	
3108 ROXBORO DRIVE	
Street	
AMES, IOWA 50010	
City, State, Zip Code	
515	292-8013
()	
Area Code	Telephone

IA ETHICS & CAMPAIGN
DISCLOSURE BOARD
JAN 19 2007
FILED pm 1-12

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.

Jen Livingston
Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)
1-15-07
Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

Reset Form

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)
 LIVINGSTON FOR 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 <u>LINDA LIVINGSTON</u>	Political Party (if applicable) <u>REPUBLICAN</u>
Office Sought <u>STATE SENATE</u>	District (if Senate or House) <u>23</u>

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only <u>1689</u>	
Comm. #	<u>5</u>
Logged In	<u>5</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	

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.

Linda Livingston 515-292-9167 1-15-07
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 1-19-07 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) JAN 19 2007 Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED pm 1-12

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.)	\$ 54.12
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....	1,400.00
Schedule F: Loans Received total (Attach Schedule F).....	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL	\$ 1,454.12
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....	162.74
Schedule F: Loan Repayments total (Attach Schedule F).....	1,291.38
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....	\$ 0.00
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 22,706.73
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$ 0.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> 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

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SCHEDULE A (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)
LIVINGSTON FOR 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
9-10-06	ID# CK#	CHUCK WINKLEBLACK 2508 DALTON AMES, IOWA 50014		\$100.00	<input type="checkbox"/>
10-19-06	ID# CK#	BARB KOLNER 1008 OKLAHOMA AMES, IOWA 50014		50.00	<input type="checkbox"/>
10-19-06	ID# 9742 CK# 1128	ALL CHILDREN MATTER 951 IOWA STREET DUBUQUE, IOWA 52001 I		1000.00	<input type="checkbox"/>
11-3-06	ID# CK#	JAMI LARSON 3321 RIDGETOP ROAD AMES, IOWA 50014		100.00	<input type="checkbox"/>
11-3-06	ID# CK#	JAN CORNWELL 2115 ASHMORE CIRCLE AMES, IOWA 50014		150.00	<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				\$	
TOTAL (if last page of this schedule)				\$ 1400.00	

* 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

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)
LIVINGSTON FOR 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
11-2-06	ID# CK#	WELLS FARGO AMES, IOWA 50010	SERVICE CHARGE	\$ 2.14
12-10-06	ID# CK# 1023	ALPHA COPIES 2310 LINCOLN WAY AMES, IOWA 50014	STICKERS	46.65
12-10-06	ID# 1024 CK#	PHIL VAN DE VOORE SCOTT AVE AMES, IOWA 50014	RE ABSENTEE VOTERS AND AVERY WHITE LASER MA	98.97
12-2-06	ID# CK#	WELLS FARGO AMES, IOWA 50010	SERVICE CHARGE	7.49
1-2-07	ID# CK#	WELLS FARGO BANK AMES, IOWA 50010	SERVICE CHARGE	7.49
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 162.74

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)

LIVINGSTON FOR SENATE

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SCHEDULE E
(Rev. 06/97) **IN-KIND CONTRIBUTIONS**

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
11-13-06	LINDA LIVINGSTON 3108 ROXBORO DRIVE AMES, IOWA 50010		ADS IN AMES TRIBUNE	\$ 1,133.43	<input type="checkbox"/>
11-2-06	LINDA LIVINGSTON 3108 ROXBORO DRIVE AMES, IOWA 50010		ADS IN AMES TRIBUNE	1,000.20	<input type="checkbox"/>
10-10-06	LINDA LIVINGSTON 3108 ROXBORO DRIVE AMES, IOWA 50010		SIGNS	494.34	<input type="checkbox"/>
10-31-006	REPUBLICAN PARTY OF IOWA 621 E. 9TH STREET DES MOINES, IOWA 50309		TV AD	1,282.10	<input type="checkbox"/>
10-30-06	REPUBLICAN PARTY OF IOWA 621 E. 9TH STREET DES MPOINES, IOWA 50309		PRINTING AND MAILSHOP	714.77	<input type="checkbox"/>
11-3-06	REPUBLICAN PARTY OF IOWA 621 E. 9TH STREET DES MOINES, IOWA 50309		PRINTING AND MAILSHOP	5,047.40	<input type="checkbox"/>
11-15-06	REPUBLICAN PARTY OF IOWA 621 E. 9TH STREET DES MOINES, IOWA 50309		TV AND ADIO ADS	1,711.80	<input type="checkbox"/>
11-29-06	REPUBLICAN PARTY OF IOWA 621 E. 9TH STREET DES MOINES, IOWA 50309		PRINT AND MAIL POSTCARDS	5,919.62	<input type="checkbox"/>
12-12-06	REPUBLICAN PARTY OF IOWA 621 E. 9TH STREET DES MOINES, IOWA 50309		PRINT AND MAIL POSTCARDS	1,694.45	<input type="checkbox"/>
1-15-07	LINDA LIVINGSTON 3108 ROXBORO DRIVE AMES, IOWA 50010		LOAN FORGIVEN	3,708.62	<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$	22,706.73

*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.

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SCHEDULE F (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)
LIVINGSTON FOR SENATE

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 5000.00

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
1-15-07	LINDA LIVINGSTON 3108 ROXBORO DRIVE AMES, IOWA 50010	SELF	\$ 1291.38

TOTAL CASH REPAYMENTS (PART II) \$ 1291.38
 From Schedule E -- TOTAL LOANS FORGIVEN \$ 3708.62
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 00.00

*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.