

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1672
Logged In	[Signature]
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)
SAMMLER for State Representative

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 JIM SAMMLER Political Party (if applicable) Democrat
 Office Sought State Representative District (if Senate or House) HD 59

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] 221-3491 01/03/07
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A notice of dissolution REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
 (report date) 1-3-07 Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

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.)
 - 4 200 h.d.

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>797.59</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		<u>- NONE -</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>797.59</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....		<u>797.59</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>0</u>

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ _____

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ _____

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ _____

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES _____ 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

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)
SAMMUEL 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# 1012	office Depot printing supplies	for mailing	\$82. ⁶⁶
11/12/06	ID# CK# 1013	Candidate - Repay personal cr. card	final thank you dinner w/ staff	120. ⁹⁵
11/21/06	ID# CK# 1014	DMARC Food Pantry	donation	100. ⁰⁰
11/21/06	ID# CK# 1015	United Way of Central Iowa	donation	100. ⁰⁰
11/21/06	ID# CK# 1016	Eddie Davis Community Center	donation	100. ⁰⁰
11/21/06	ID# CK# 1017	West Des Moines Human Services	donation	100. ⁰⁰
11/30/06	ID# CK# 1018	Toys for tots	donation	100. ⁰⁰
12/19/06	ID# CK# 885713	Greater Dm Habitat for Humanity Cashiers Check Banker Trust to close account	donation	93. ⁹⁸
SUB-TOTAL				\$ 797. ⁵⁹
TOTAL (if last page of this schedule)				\$797. ⁵⁹

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).)

Notice of Dissolution

FORM

(Rev. 07/03)

Reset Form

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



DR-3
NOTICE OF
DISSOLUTION

For Office Use Only

Comm. # _____ 1672
Indexed 2
Audited _____
Computer _____
Certified Date of Dissolution _____

COMMITTEE NAME

SAMPLER for State Representative	
Official Name of Committee	
1041 18 th Street	
Street	
West Des Moines, IA 50265	
City, State, Zip Code	
515	221-3491/60
Area Code	Telephone
	221-3485

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)

1-3-07

Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.