

**DISCLOSURE SUMMARY PAGE**

Reset Form

<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1411
Logged In	S
Scanned	
Computer	
Audited	

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

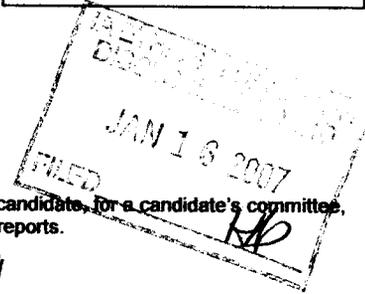
SEYMOUR FOR SENATE

**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 JAMES A. SEYMOUR Political Party (if applicable) REPUBLICAN

Office Sought \_\_\_\_\_ District (if Senate or House) SD-28



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.

James A. Seymour (712) 647-2699

SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

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

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**

**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.) .....\$ 15,752.95

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)..... 6546.62

Schedule F: Loans Received total (Attach Schedule F) .....

Schedule H: Total Sales of Campaign Property (Attach Schedule H).....

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** .....\$ 22,299.57

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ..... 12,225.15

Schedule F: Loan Repayments total (Attach Schedule F) .....

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) (Attach DR-3) .....\$ 10,074.42

---

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ 2,009.60

\*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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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
1/13/06	ID# CK# 1775	MIKE BARKER P.O. Box 8-C Council Bluffs IA. 51502		\$ 120.00	✓
1/13/06	ID# CK# 5062	R. DWELL or MARY GILSON 245 NICHOLAS COUNCIL BLUFFS IA. 51501		25.00	✓
1/13/06	ID# CK# 1367	ELIZABETH W. PLUMB 811 7th ST. HARLON IA. 51537		20.00	✓
1/13/06	ID# CK# 5207	CAROL D. WOOD 245 GLEN RIDGE CIRCLE COUNCIL BLUFFS, IA. 51503		15.00	✓
1/13/06	ID# CK# 3709	LUCINDA KLEIN-LOMBARD 513 BENCH ST. COUNCIL BLUFFS IA. 51503		10.00	✓
1/27/06	ID# CK#	VINCENT WILLEY 315 MIKE CT. WHITING IOWA		50.00	
2/24/06	ID# CK# 6128	JOHN & EVANNE SHEVER 2967 EAGLE RIDGE DR MISSOURI VALLEY IOWA 51555		125.00	
2/24/06	ID# CK#	CHARLES & BARBARA MILLER 1547 RIPLEY LN. WOODBURN IOWA 51579		30.00	
7/18/06	ID# CK# 1769	MEDICO HEALTH PAC 591 REDWOOD HWY MILL VALLEY CALIFORNIA 94941		300.00	
8/19/06	ID# CK# 2529	IOWA HOSPITAL ASSOC. PAC 100 E. GRAND AVE DES MOINES IOWA 50309		1000.00	

SUB-TOTAL

\$1695.00

TOTAL (if last page of this schedule)

\$

\* 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) (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.

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)  
*SEYMOUR 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.

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
✓ 8/22/06	ID# 6067 CK# 3526	Iowa Health PAC 6750 Westown Parkway West Des Moines 50266		\$ 250 <sup>00</sup>	<input checked="" type="checkbox"/>
8/22/06	ID# CK# 3393	STEVEN HEKERUM 1634 NW 131ST CLIVE, IOWA 50325		100 <sup>00</sup>	<input checked="" type="checkbox"/>
8/22/06	ID# CK# 2745	DAVID & AMY SHEVER 2967 Eagle Ridge Dr. Missouri Valley Iowa 51555		100 <sup>00</sup>	<input checked="" type="checkbox"/>
8/22/06	ID# CK# 6291	John & Evonne Shever 309 Normal St. Woodbine Iowa 51579		150 <sup>00</sup>	<input checked="" type="checkbox"/>
8/22/06	ID# CK# 7219	Julie Newton 305 Normal St. Woodbine Iowa 51579		25 <sup>00</sup>	<input checked="" type="checkbox"/>
8/22/06	ID# CK# 5673	CHRISTINE HEDGER 2330 NORTON AVE Logan, Iowa 51546		25 <sup>00</sup>	<input checked="" type="checkbox"/>
✓ 8/28/06	ID# CK# 2109	Iowa Podiatric Medical Society 525 SW 5th St. Ste A Des Moines, Iowa 50309		100 <sup>00</sup>	<input type="checkbox"/>
c 9/7/06	ID# 6063 CK# 2007	IOWA DENTAL PAC 5530 WEST Parkway STE 100 Johnston Iowa 50131		1,000	<input type="checkbox"/>
9/11/06	ID# CK#	CRAIG H. NEILSEN LAS VEGAS, NEVADA		300	<input type="checkbox"/>
✓ 10/7/06	ID# 6351 CK# 1104	PETROLEUM MARKETERS & CONVENIENCE STORES of IOWA 1303 50th St. WDM, IA 50266		250	<input type="checkbox"/>
SUB-TOTAL				\$2300	
TOTAL (if last page of this schedule)				\$	

\* 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. 06/97)	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)  
**JEYMOUR 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.

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
9/16/06	ID# 6160 CK# 2250	Iowa INDEPENDENT BANKERS 1603 22nd ST. STE 202 WEST DES MOINES, IOWA 50266		\$ 500 <sup>00</sup> -	<input type="checkbox"/>
9/16/06	ID# CK# 2007	Edward FRIEDMAN Elizabeth COATE PO Box C Redfield, Ia. 60233		250 <sup>00</sup> -	<input type="checkbox"/>
10/5/06	ID# 6430 CK# 1154	WEST CENTRAL IOWA RURAL WATER ASSOC. PO Box 188 MANNING IOWA 51455		100 <sup>00</sup> -	<input type="checkbox"/>
10/5/06	ID# CK# 3844	PFIZER INC PAC 235 EAST 42nd ST New York, New York 10017		150 <sup>00</sup> -	<input type="checkbox"/>
10/11/06	ID# CK# 5211	FAREWELL STORES INC. PAC 2600 E. 8th St BOONE, IA 50036		250 <sup>00</sup> -	<input type="checkbox"/>
10/14/06	ID# 6478 CK# 1183	Iowa Assoc. of NURSE ANESTHETISTS 1156 FOREST ST. CARROLL, IA. 51401		100 <sup>00</sup> -	<input type="checkbox"/>
10/16/06	ID# CK# 6938	WYETH GOOD GOVERNMENT FUND. FIVE GIRALDA FARMS MADISON, NJ 07940		100 <sup>00</sup> -	<input type="checkbox"/>
10/16/06	ID# 6058 CK# 2896	IOWA CHIROPRACTIC PAC 1605 N. ANKENY Blvd. ANKENY IOWA 50023		100 <sup>00</sup> -	<input type="checkbox"/>
10/9/06	ID# CK# 963	CAREMARK PAC 2211 SANDERS Road North Brook, FL. 60062		100 <sup>00</sup> -	<input type="checkbox"/>
10/26/06	ID# CK#	IOWA DENTAL HYGIENISTS Assoc c/o ANN CHAMBERS 312 LAFAYETTE AVE PO Box 61 Council Bluffs Iowa 51502		250 <sup>00</sup> -	<input type="checkbox"/>
SUB-TOTAL				\$ 1900 <sup>00</sup> -	
TOTAL (if last page of this schedule)				\$	

\* 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) (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.

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)  
**SEYMOUR 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.

**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
10/26/06	ID# CK# 4413	THOMAS LANGEL 23776 Noble Ave. LEMAIRS Iowa		\$ 100 <sup>00</sup>	<input type="checkbox"/>
10/26/06	ID# CK# 7586	MIKE or BECCY NOTHEM 702 BECK AVE REMSEN Iowa 51050		50 <sup>00</sup>	<input type="checkbox"/>
✓ 10/27/06	ID# CK# 106	IOWA PHYSICIAN ASSN PAC PO Box 222 Redfield Iowa 50733		140 <sup>00</sup>	<input type="checkbox"/>
✓ 12/9/06	ID# CK# 1345	IOWA PROVIDERS PAC 7025 HICKMAN Rd URBANDALE Iowa 50322		200 <sup>00</sup>	<input type="checkbox"/>
12/28/06	ID# CK#	UNITEMIZED Contributions		154 <sup>00</sup>	<input type="checkbox"/>
12/28/06	ID# CK#	BANK of the West INTEREST INCOME		7.62	<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 \$ 651.62

TOTAL (if last page of this schedule) \$ 6546.62

\* 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. 09/97)	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)  
**SEYMOUR 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
1/14/06	ID# CK# 1031	Iowa County Republican Central Committee	FUND RAISER	\$ 50.00
1/27/06	ID# CK# 1032	Verizon Wireless	CELL PHONE	40.47
2/19/06	ID# CK# 1033	Verizon Wireless	CELL PHONE	45.51
3/14/06	ID# CK# 1034	Republican Party of Iowa	CONTRIBUTION	40.00
3/17/06	ID# CK# 1035	Verizon Wireless	CELL PHONE	40.36
4/10/06	ID# CK# 1036	STATE of Iowa DES MOINES, Iowa	IOWA STATE FLAG FUNDRAISER	21.00
4/20/06	ID# CK# 1037	Verizon Wireless	CELL PHONE	40.39
5/22/06	ID# CK# 1038	Verizon Wireless	CELL PHONE	40.62
SUB-TOTAL				\$ 318.35
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 56.6(3)(i).)

Visitors Cash US Postage 207  
State House Post Office

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)  
**SEYMOUR 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
6/5/06	ID# CK# 1039	US POSTMASTER WOODHANE IOWA	1ST. CLASS POSTAGE	\$ 39.43
6/19/06	ID# CK# 1040	VERIZON WIRELESS	CELL PHONE	39.43
7/1/06	ID# 9161 CK# 1041	GOP LEGISLATIVE MAJORITY FUND.	CONTRIBUTION	10,000 <sup>00</sup>
7/24/06	ID# CK# 1042	VERIZON WIRELESS	CELL PHONE	39.39
7/27/06	ID# CK# 1043	ALTRIA CORP. SERVICES INC THREE LAKES DRIVE NORTHFIELD, IL 60093	KRAFT FOODS CAPITAL WORKSHOP 1-24-2006	22.41
8/5/06	ID# CK# 1044	IOWA CHRISTIAN ALLIANCE PO BOX 65066 W. DES MOINES IA 50265	CONTRIBUTION	150. <sup>00</sup>
8/7/06	ID# CK# 1045	POTTAWATTAMIE COUNTY REPUBLICAN PARTY COUNCIL BLUFFS IOWA	CONTRIBUTION	125. <sup>00</sup>
8/19/06	ID# CK# 1046	VERIZON WIRELESS	CELL PHONE	39.39
SUB-TOTAL				\$ 10,450. <sup>00</sup>
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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	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)  
**SEYMOUR 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
8/17/06	ID# CK# 1047	Office Max Council Bluffs Iowa	Printer ink refills Copy Paper	\$ 56.15
8/27/06	ID# CK# 1048	Harrison County Republican Women Dundlap, Iowa	Fundraiser	100.00
8/27/06	ID# CK# 1049	Harrison County Republican Women Dundlap, Iowa	Fundraiser	30.00
9/5/06	ID# CK# 1050	Crawford County Central Committee DENISON, IOWA	DINNER MEETING	25.00
9/23/06	ID# CK# *1051	VERIZON WIRELESS	CELL PHONE	39.39
9/25/06	ID# CK# 1152	JAMES SEYMOUR 901 WHITE ST WOODBINE, IOWA	PARADE CANDY VOLUNTEERS - PIZZ	213.04
11/22/06	ID# CK# 1153	VERIZON WIRELESS	CELL PHONE 2 months Oct/Nov.	83.56
12/9/06	ID# CK# 1154	JAMES SEYMOUR 901 WHITE ST. WOODBINE IOWA	NCSL FALL MEETING SAN ANTONIO, TEXAS REGISTRATION - HOTEL Z-NITE	826.33
SUB-TOTAL				\$ 1,373.47
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 56.6(3)(i).)

\* New Checks  
From Bank of the West

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	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)  
**SEYMOUR 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
12/18/06	ID# CK# 1155	Verizon Wireless	CELL PHONE	\$ 39.28
12/18/06	ID# CK# 1156	U.S. POSTMASTER WOODBINE, IOWA	1ST. CLASS STAMPS	39.00
	ID# CK#			
SUB-TOTAL				\$ 78.28
TOTAL (if last page of this schedule)				\$ 12,225.15

**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 56.6(3)(i).)

