

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD.  
pm 7-18  
2007 JUL 20 AM 8:58

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

Smith for State House

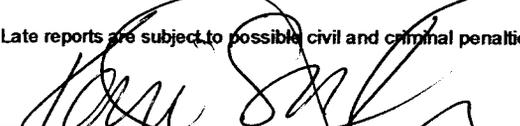
**IMPORTANT:** Indicate by # type of committee you are reporting for:  (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name Roby Smith	Political Party (if applicable) Republican
Office Sought State Representative	District (if Senate or House) 85

<b>FORM</b> <b>DR-2</b> (Rev. 07/2007)	<b>DISCLOSURE</b> <b>REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1647
Logged In	
Scanned	
Computer	WRS
Audited	7-30-07

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

  
SIGNATURE OF PERSON FILING REPORT

563-386-0179  
TELEPHONE

7-15-07  
DATE SIGNED

I AM FILING A December 31, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date)

Indicate by #  (1)

CHECK IF AMENDMENT TO REPORT DATED July 14, 2007 1-15-07  
 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**

<b>CASH ON HAND</b> at the beginning of the reporting period. (Total of all funds held by the committee. This amount <b>MUST</b> 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.)	\$	372.42	—
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>			
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		8,175.00	—
Schedule F: Loans Received total (Attach Schedule F)			
Schedule H: Total Sales of Campaign Property (Attach Schedule H)			
<b>(Schedule H applies to Candidates' Committees Only)</b>			
<b>SUB-TOTAL</b>	\$	8,547.42	
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>			
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		8,512.57	—
Schedule F: Loan Repayments total (Attach Schedule F)			
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero)	\$	34.85	—
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$	1,469.45	—
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$	7,364.03	—
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$	2,200.00	—
<b>CONSULTANT BREAKDOWN</b> (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)

IA ETHICS CAMPAIGN DISCLOSURE BOARD  
Reset Form

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

COMMITTEE NAME (Must be same as on Statement of Organization)  
Smith for State House

2007 JUL 20 AM 8:58

NO CHANGE 28

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
11/03/06	ID# CK#	Peter Pohlmann 3700 N Harrison St Davenport, IA 52806		\$250.00	<input type="checkbox"/>
11/03/06	ID# CK#	Lois Warnsholz 26 Madison Cir Davenport, IA 52806		\$50.00	<input type="checkbox"/>
11/04/06	ID# CK#	Michael Gorsline 5689 Remington Rd N Bettendorf, IA 52722		\$500.00	<input type="checkbox"/>
11/04/06	ID# CK#	Roger Mall 5123 Woodland Ave Davenport, IA 52807		\$50.00	<input type="checkbox"/>
11/06/06	ID# CK#	John Bush 5401 Victoria Ave Davenport, IA 52807		\$100.00	<input type="checkbox"/>
11/04/06	ID# CK#	Roger Mall 5123 Woodland Ave Davenport, IA 52807		\$150.00	<input type="checkbox"/>
11/07/06	ID# CK#	Maxine Smith 4520 E Montana Pl Denver, CO 80222	Grandmother	\$50.00	<input type="checkbox"/>
11/07/06	ID# CK#	Richard Davis 1325 Mount Curve Ave Minneapolis, MN 55403		\$500.00	<input type="checkbox"/>
11/07/06	ID# 6069 CK# 2422	Iowa Industry Political Action Committee 904 Walnut, Ste 100 Des Moines, IA 50309		\$500.00	<input type="checkbox"/>
11/07/06	ID# CK#	Diane Mueller 5105 Western Ave Davenport, IA 52806		\$25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2175.00	
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). 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

IA ETHICS AND CAMPAIGN DISCLOSURE **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)

2007 JUL 20 AM 8:58

**COMMITTEE NAME (Must be same as on Statement of Organization)**  
Smith for State House

**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.

*NO CHANGES*

**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
✓ 11/03/06	ID# 9161 CK#	Republican Party of Iowa 621 E 9th St Des Moines, 50309		\$5000.00	<input type="checkbox"/>
✓ 12/09/06	ID# 9161 CK#	Republican Party of Iowa 621 E 9th St Des Moines, 50309		\$1000.00	<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 6000.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 8175.00	

\* 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

Reset Form

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" 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)

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
11/03/2006	ID# CK#	Victory Enterprises 5200 SW 30th Street Davenport, IA 52802	Radio- WFXN	\$ 957.61
11/06/06	ID# CK#	Farm and Fleet 8535 Northwest Blvd Davenport, IA 52806	Stakes	79.72
11/07/06	ID# CK#	Candace Turitto 1638 W 29th St #12 Davenport, IA 52804	Printing and Postage Reimbursement	193.49
11/03/06	ID# CK#	Paypal www.paypal.com	on-line donation commission	3.75
12/27/06	ID# CK#	Kari Smith 2903 W 35th Street Davenport, IA 52806	Reimbursement for Media Buy at Victory Enterprises for: WOC, KCQQ, OnMedia	7278.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 8512.57</b>

**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

IA ETHICS AND  
CAMPAIGN DISCLOSURE BOARD

COMMITTEE NAME (Must be same as on Statement of Organization)  
 Smith for State House

2007 JUL 20 AM 9:58

Reset Form

SCHEDULE <b>E</b> (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM NO CHANGES	

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
10/27/06	Republican Party of Iowa 621 E 9th Street Des Moines, IA 50309		Printing	\$ 85.07	<input type="checkbox"/>
10/27/06	Republican Party of Iowa 621 E 9th Street Des Moines, IA 50309		Printing	2,012.10	<input type="checkbox"/>
11/01/06	Republican Party of Iowa 621 E 9th Street Des Moines, IA 50309		Direct Mail	466.40	<input type="checkbox"/>
11/01/06	Republican Party of Iowa 621 E 9th Street Des Moines, IA 50309		Direct Mail	4,700.46	<input type="checkbox"/>
11/01/06	Steve Grubbs 324 Fairmount St Davenport, IA 52802		Signs	100.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$	7,364.03

\*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.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 Smith for State House

SCHEDULE <b>F</b> (Rev. 07/03)	LOANS RECEIVED & REPAID
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

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

**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD** \$ 2200.00

**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.)

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
 (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable*)	AMOUNT OF LOAN
			\$

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (if Applicable)	AMOUNT REPAID
			\$

IA ETHICS AND CAMPAIGN DISCLOSURE ACT  
 2017 JUL 20 AM 9:58

**TOTAL (PART I)** \$ \_\_\_\_\_

**TOTAL CASH REPAYMENTS (PART II)** \$ \_\_\_\_\_

**From Schedule E -- TOTAL LOANS FORGIVEN** \$ \_\_\_\_\_

**TOTAL OUTSTANDING LOANS END OF REPORT PERIOD** \$ \_\_\_\_\_

\*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.

Reset Form

**DISCLOSURE SUMMARY PAGE**

<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # <u>11647</u>	
Logged In <u>5</u>	
Scanned _____	
Computer _____	
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 <sup>th</sup> Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

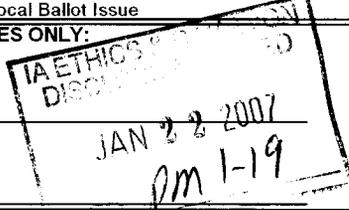
**COMMITTEE NAME** (Must be same as on Statement of Organization)

Smith for State House

**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>Roby Smith</u>	Political Party (if applicable) <u>Republican</u>
Office Sought <u>State Representative</u>	District (if Senate or House) <u>85</u>



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]  
SIGNATURE OF PERSON FILING REPORT

563-386-0179  
TELEPHONE

MDA 1/15/07  
DATE SIGNED

I AM FILING A December 31, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate by # 1

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**

<b>CASH ON HAND</b> at the beginning of the reporting period. (Total of all funds held by the committee. This amount <b>MUST</b> 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.)	\$ 372.42
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	8,175.00
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)	
<b>SUB-TOTAL</b>	\$ 8,547.42
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	8,512.57
Schedule F: Loan Repayments total (Attach Schedule F)	_____
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 34.85
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$ 1,469.45
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$ 7,364.03
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$ 2,200.00
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)	___ YES ___ NO
<b>CANDIDATE COMMITTEES ONLY:</b>	
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$ _____
<b>STATE COMMITTEES:</b> Submit a reconciled campaign account bank statement in January of each year.	

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)

Smith for State House

**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
11/03/06	ID# CK#	Peter Pohlmann 3700 N Harrison St Davenport, IA 52806		\$250.00	<input type="checkbox"/>
11/03/06	ID# CK#	Lois Warnsholz 26 Madison Cir Davenport, IA 52806		\$50.00	<input type="checkbox"/>
11/04/06	ID# CK#	Michael Gorsline 5689 Remington Rd N Bettendorf, IA 52722		\$500.00	<input type="checkbox"/>
11/04/06	ID# CK#	Roger Mall 5123 Woodland Ave Davenport, IA 52807		\$50.00	<input type="checkbox"/>
11/06/06	ID# CK#	John Bush 5401 Victoria Ave Davenport, IA 52807		\$100.00	<input type="checkbox"/>
11/04/06	ID# CK#	Roger Mall 5123 Woodland Ave Davenport, IA 52807		\$150.00	<input type="checkbox"/>
11/07/06	ID# CK#	Maxine Smith 4520 E Montana Pl Denver, CO 80222	Grandmother	\$50.00	<input type="checkbox"/>
11/07/06	ID# CK#	Richard Davis 1325 Mount Curve Ave Minneapolis, MN 55403		\$500.00	<input type="checkbox"/>
11/07/06	ID# 6069 CK# 2422	Iowa Industry Political Action Committee 904 Walnut, Ste 100 Des Moines, IA 50309		\$500.00	<input type="checkbox"/>
11/07/06	ID# CK#	Diane Mueller 5105 Western Ave Davenport, IA 52806		\$25.00	<input type="checkbox"/>

SUB-TOTAL

\$ 2175.00

**TOTAL (if last page of this schedule)**

\$

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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)

Smith for State House

**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.

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**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
11/03/06	ID# CK#	Republican Party of Iowa 621 E 9th St Des Moines, 50309		\$5000.00	<input type="checkbox"/>
12/09/06	ID# CK#	Republican Party of Iowa 621 E 9th St Des Moines, 50309		\$1000.00	<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 6000.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 8175.00	

\* 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

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)  
Smith for State House

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
11/03/06	ID# CK#	Victory Enterprises 5200 SW 30th Street Davenport, IA 52802	Radio	\$ 957.61
11/06/06	ID# CK#	Farm and Fleet 8535 Northwest Blvd Davenport, IA 52806	Stakes	\$79.72
11/07/06	ID# CK#	Candace Turitto 1638 W 29th St #12 Davenport, IA 528004	Printing and postage reimbursement	\$193.49
11/03/06	ID# CK#	Paypal www.paypal.com	On-line donation commission	\$3.75
12/27/06	ID# CK#	Kari smith 2903 W 35th Street Davenport, IA 52806	Reimbursement for media buy at Victory Enterprises and website	\$7278.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 8512.57</b>

**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)  
 Smith for State House

Reset Form

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
10/27/06	Republican Party of Iowa 621 E 9th Street Des Moines, IA 50309		Printing	\$ 85.07	<input type="checkbox"/>
10/27/06	Republican Party of Iowa 621 E 9th Street Des Moines, IA 50309		Printing	2,012.10	<input type="checkbox"/>
11/01/06	Republican Party of Iowa 621 E 9th Street Des Moines, IA 50309		Direct Mail	466.40	<input type="checkbox"/>
11/01/06	Republican Party of Iowa 621 E 9th Street Des Moines, IA 50309		Direct Mail	4,700.46	<input type="checkbox"/>
11/01/06	Steve Grubbs 324 Fairmount St Davenport, IA 52802		Signs	100.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$	7,364.03

\*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.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)  
 Smith for State House

SCHEDULE <b>F</b> (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 2200.00

**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
			\$

TOTAL CASH REPAYMENTS (PART II) \$ \_\_\_\_\_

From Schedule E -- TOTAL LOANS FORGIVEN \$ \_\_\_\_\_

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ \_\_\_\_\_

\*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.