

DISCLOSURE SUMMARY PAGE

FORM
DR-2
(Rev. 11/97) DISCLOSURE REPORT

COMMITTEE NAME (Must be same as on Statement of Organization)
REPUBLICAN WOMEN OF MADISON COUNTY

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
JAN 11 2007
FILED

For Office Use Only
Comm. # 9551
Indexed S
Audited _____
Computer _____

IMPORTANT: Indicate type of committee you are reporting for: 2

- (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
- (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
- (8) Support State of Candidates

Mary Hart, Treas. 515-462-4081 01-10-07
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE DATE SIGNED

Penalties Due For Late Filed Reports Range from \$10 to \$400

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 10-15-06 to 12-31-06 REPORT FOR AN/A (1) ELECTION //(2) NON-ELECTION YEAR.
(report date) Indicate one 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 Notice of Dissolution is filed.)

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies 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.)\$ 144.05

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 360.00
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)

SUB-TOTAL.....\$ 504.05

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 25.00
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)\$ 479.05

UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 252.00

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

OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$ NA

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES NA NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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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 FOI FUND-RAISER INCOME
12-05-06	ID# CK#	21 membership dues paid for 2007 @ 15.00 each		\$ 315.00	
12-18-06	ID# CK#	3 membership dues paid for 2007 @ \$15.00 each		45.00	
	ID# CK#				
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$ 360.00	

* 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) (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

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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.

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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
12-05-06	ID# CK#259	Winterset Community School District 405 S. 2nd Ave. Winterset, Ia 50273	HELPS Assistance program for elementary school	\$ 25.00
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$25.00

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).)

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NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

SCHEDULE D (Rev. 02/96)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
12-05-06	Iowa Federation Republican Women Karen McAllister 3717 - 190th St. 21 dues @ \$10.00 Farragut, Ia 51639	210.00
12-05-06	Mrs. Dean Grant 4th District Treasurer 2404 Kingsley Ave. 21 dues @ .50 Rockwell City, Ia 50579	10.50
12-16-06	Iowa Federation Republican Women Karen McAllister 3 dues @ 10.00 3717 - 190th St. Farragut, Ia 51639	30.00
12-16-06	Mrs. Dean Grant 4th District Treasurer 3 dues @ .50 2404 Kingsley Ave. Rockwell City, Ia 50579	1.50
SUB-TOTAL		\$252.00
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD		\$252.00

*If actual figure is unknown, show "estimated" beside the figure.

Page _____ of _____
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.