

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

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

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND CAMPAIGN DISCLOSURE BOARD
2011 JAN 18 AM 11:13

COMMITTEE NAME (Must be same as on Statement of Organization)
Sodders For State 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: Steve Sodders
Political Party (if applicable): Democrat
Office Sought: State Senate
District (if Senate or House): 22

FORM DR-2
(Rev. 12/2009) DISCLOSURE REPORT

For Office Use Only
Comm. # 1702
Logged in MF 1-18-11
Scanned MF 1-18-11
Computer _____
Audited _____

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 candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Amy White

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

1/15/11

DATE SIGNED

I AM FILING A Jan. 19, 2011 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

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.)	\$ 2,361.77
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	6,140.00
Schedule F: Loans Received total (Attach Schedule F)	_____
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	_____
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ 8,501.77
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	6,374.05
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)	\$ 2,127.72
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ _____
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 102.37
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ _____
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

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

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)
Sodders for State 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
1/5/10	ID# CK#	Randy Hilleman 1315 - 150th Street St. Anthony, IA 50239		\$100.00	<input type="checkbox"/>
1/5/10	ID# CK#	Christopher Rademacher 724 NE 44th CT Ankeny, IA 50021-4922		\$50.00	<input type="checkbox"/>
1/5/10	ID# CK#	John Norem 4009 Wembley Ave Ames, IA 50010-1116		\$50.00	<input type="checkbox"/>
1/7/10	ID# 6082 CK# 1459	MidAmericanEnergy Co. Effective Gov Committee 666 Grand Ave P.O. Box 657 Des Moines, IA 50303-0657		\$400.00	<input type="checkbox"/>
1/10/10	ID# 8026 CK# 20156	I.B.E.W. Educational Committee 900 Seventh Street N.W. Washington DC 20001		\$250.00	<input type="checkbox"/>
6/7/10	ID# 8005 CK# 008646	DRIVE Committee 25 Louisiana Avenue NW Washington DC 20001-2198		\$1,000.00	<input type="checkbox"/>
7/8/10	ID# CK#	Shevaun Adams-Zmolek 1007 Fremont St. Marshalltown, IA 50158		\$20.00	<input checked="" type="checkbox"/>
7/8/10	ID# CK#	Angel Munson 2510 S 6th Street Apt. A-30 Marshalltown, IA 50158		\$40.00	<input checked="" type="checkbox"/>
7/8/10	ID# CK#	Debra Moore 412 Thomas Drive Marshalltown, IA 50158		\$40.00	<input checked="" type="checkbox"/>
7/8/10	ID# CK#	Margaret Parks 504 Maple St. Garwin, IA 50632		\$20.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 1,970.00

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

Reset Form

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)
Sodders For State 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 69B.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/YYR)	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
7/8/10	ID# CK#	Pass The Hat		\$260.00	<input checked="" type="checkbox"/>
7/12/10	ID# CK#	Amber Pringnitz 2021 Chautauqua PKWY Des Moines, IA 50314-2033		\$20.00	<input type="checkbox"/>
8/17/10	ID# CK#	Angela Schultz 405 2nd St. Southeast State Center, IA 50247		\$20.00	<input type="checkbox"/>
8/19/10	ID# 6344 CK# 1283	Plumbers & Steamfitters Local 33 2501 Bell Ave. Des Moines, IA 50321		\$250.00	<input checked="" type="checkbox"/>
8/19/10	ID# 6058 CK# 4731	Iowa Chiropractic Society 100 East Grand Ave, Suite 240 Des Moines, IA 50309		\$100.00	<input checked="" type="checkbox"/>
8/19/10	ID# 6070 CK# 4005	Iowa Law PAC 625 East Court Ave Des Moines, IA 50309		\$100.00	<input checked="" type="checkbox"/>
8/19/10	ID# 6430 CK# 1648	Iowa Rural Water State PAC 4221 S 22nd Ave E. Newton, IA 50208		\$100.00	<input checked="" type="checkbox"/>
8/19/10	ID# CK#	Julie Smith 8131 Wellington BLV Johnston, IA 50131		\$50.00	<input checked="" type="checkbox"/>
8/19/10	ID# 6162 CK# 1512	Iowa Agribusiness Employees 900 Des Moines Street Des Moines, IA 50309		\$500.00	<input checked="" type="checkbox"/>
8/20/10	ID# CK#	Susan Cameron 600 Brentwood Dr. Waukee, IA 50263		\$150.00	<input type="checkbox"/>

SUB-TOTAL

\$ 1,550.00

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

Reset Form

SCHEDULE A (Rev. 07/03)	MONEY 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)
Sodders For State 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/YYR)	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
8/22/10	ID# CK#	Bradley Dyke 407 Sandpiper Ct. Apt 2 Polk City, IA 50226		\$20.00	<input type="checkbox"/>
8/22/10	ID# CK#	Robert Christenson (Act Blue) 2471 Jefferson Drive Marshalltown, IA 50158		\$25.00	<input type="checkbox"/>
8/24/10	ID# CK#	Lonnie Hogeland 1408 E. Main St. Marshalltown, IA 50158		\$50.00	<input type="checkbox"/>
8/25/10	ID# CK#	Mary Beth Lawler 111 Foster BLVD Iowa Falls, IA 50126		\$20.00	<input type="checkbox"/>
8/26/10	ID# CK#	Joel Greer 112 W Church St. Marshalltown, IA 50158		\$20.00	<input type="checkbox"/>
8/29/10	ID# CK#	James Roberts 685 Oakview Place Sequim, WA 98382	Father-In-Law	\$20.00	<input type="checkbox"/>
8/29/10	ID# CK#	JoAnn Roberts 685 Oakview Place Sequim, WA 98382	Mother-In-Law	\$20.00	<input type="checkbox"/>
8/30/10	ID# 6067 CK# 5144	IowaHealth PAC 1775 90th Street West Des Moines, IA 50266		\$250.00	<input type="checkbox"/>
9/3/10	ID# CK#	Sandor Toszegi 401 Lincoln Valley Dr. State Center, IA 50247		\$50.00	<input type="checkbox"/>
9/8/10	ID# CK#	Steve Kriegel 331 330th Gilman, IA 50106		\$20.00	<input type="checkbox"/>

SUB-TOTAL

\$ 495.00

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

Reset Form

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)

Sodders For State 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/YYR)	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
9/10/10	ID# CK#	Nola Manship 209 Grant P.O. Box 63 Liscomb, IA 50148		\$20.00	<input type="checkbox"/>
9/20/10	ID# 6008 CK# 2242	Associated Builders & Contractors of Iowa 475 Alices Rd. STE A Waukee, IA 50263		\$250.00	<input type="checkbox"/>
9/22/10	ID# CK#	Sandy Short 804 W Merle Hibbs BLVD Marshalltown, IA 50158		\$100.00	<input type="checkbox"/>
9/22/10	ID# CK#	Donald E. Taylor Inc. 106 S 3rd Ave Marshalltown, IA 50158		\$100.00	<input type="checkbox"/>
10/10/10	ID# CK#	Aaron Willits 1249 Hart Ave Union, IA 50258		\$20.00	<input type="checkbox"/>
10/10/10	ID# CK#	Judy Clark P.O. Box 125 Union, IA 50258		\$20.00	<input type="checkbox"/>
10/10/10	ID# 6098 CK# 3779	Iowa BEV PAC #6098 321 E Walnut Suite 310 Des Moines, IA 50309-2026		\$500.00	<input type="checkbox"/>
10/10/10	ID# 4736 CK# 3217	Iowans for a Skilled Workforce 707 East Locust Street Des Moines, IA 50309		\$250.00	<input type="checkbox"/>
10/22/10	ID# CK#	Carolyn Gill P.O. Box 208 Albion, IA 50005-0208		\$20.00	<input type="checkbox"/>
10/22/10	ID# CK#	Catherine Noble P.O. Box 186 State Center, IA 50247		\$20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1,300.00	
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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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

Sodders For State 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(5), 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
10/22/10	ID# CK#	Sandy Short 804 W Merle Hibbs BLVD Marshalltown, IA 50158		\$100.00	<input type="checkbox"/>
10/22/10	ID# CK#	Catherine Strobel 3120 Red Fox Rd Ames, IA 50014-8070		\$50.00	<input type="checkbox"/>
10/22/10	ID# 9748 CK# 1151	Midwest PAC 1636 NW 114th St. Clive, IA 50325-7071		\$200.00	<input type="checkbox"/>
10/22/10	ID# CK#	Shawn Adam 6226 Wapello Jefferson Road Batavia, IA 52533		\$100.00	<input type="checkbox"/>
10/22/10	ID# CK#	Deanna Kraft 101 Gillespie St Renwick, IA 50577		\$50.00	<input type="checkbox"/>
10/22/10	ID# 6475 CK# 2812	Casey's PAC P.O. Box 3001 Ankeny, IA 50021-8045		\$250.00	<input type="checkbox"/>
10/22/10	ID# CK#	Cynthia Schulte 204 Lincoln Valley Drive State Center, IA 50247		\$50.00	<input type="checkbox"/>
11/14/10	ID# CK#	Robert Christenson (Act Blue) 2471 Jefferson Drive Marshalltown, IA 50158-9661		\$25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 825.00	
TOTAL (if last page of this schedule)				\$ 6,140.00	

* 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

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)
Sodders For State 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
2/15/10	ID# CK# 1092	Garner Printing 1697 N.E. 53rd Ave Des Moines, IA 50313	Postcaeds	\$ 532.59
8/2/10	ID# CK# 1093	Iowa Federation of Labor 2000 Walker St #A Des Moines, IA 50317-5290	Advertising	\$83.00
8/22/10	ID# CK#	Auburn Quad, Inc. P.O. Box 390728 Cambridge, MA 02139	Credit Card Handling Fee (Act Blue)	.99
9/1/10	ID# CK# 1094	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321	VAN Payment	\$500.00
9/4/10	ID# CK# 1095	Carter Printing 1739 East Grand Avenue Des Moines, IA 50316	Letterhead & envelopes	\$156.48
9/22/10	ID# CK# 1096	Senate Majority Fund 5661 Fleur Drive Des Moines, IA 50321	Donation	\$4,000.00
10/10/10	ID# CK# 1097	Donald E. Taylor Inc. 106 S 3rd Ave Marshalltown, IA 50158	Refund of Contribution	\$100.00
10/10/10	ID# CK# 1098	Senate Majority Fund 5661 Fleur Drive Des Moines, IA 50321	Donation	\$1,000.00
SUB-TOTAL				\$ 6,373.06
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

Reset Form

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)
Sodders For State 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
11/14/10	ID# CK#	Auburn Quad, Inc. P.O. Box 390728 Cambridge, MA	Credit Card Handling Fee (Act Blue)	\$.99
	ID# CK#			
SUB-TOTAL				\$.99
TOTAL (if last page of this schedule)				\$ 6.374.05

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)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
 Soddors For State Senate

Reset Form

SCHEDULE E (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
6/19/10	Steve Soddors P.O. Box 723 State Center, IA 50247		Room Rent	\$ 25.00	<input checked="" type="checkbox"/>
8/5/10	Iowa Senate Majority Fund 5661 Fleur Drive Des Moines, IA 50321		Postage for Des Moines Fundraiser	25.37	<input checked="" type="checkbox"/>
8/19/10	Iowa Senate Majority Fund 5661 Fleur Drive Des Moines, IA 50321		Food for Des Moines Fundraiser	52.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 102.37	
TOTAL (if last page of this schedule)				\$ 102.37	

*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.