IOWA HOUSE OF REPRESENTATIVES

CANDIDATE FINANCIAL DISCLOSURE FORM

The following form shall be used for disclosure of economic interests under House Ethics rules and section 68B.35 of the Iowa Code.

STATEMENT OF ECONOMIC INTERESTS.

Name: WYXNT (Last)	Elle (First)	(Middle Initial)	
Address: 1514 M AUS (Street Address, Apartment N	Number or P.O. Box)		
MARENGO (City)	(State)	52301 (Zip)	
Phone: (Home)319 /610 86	95(Business)/		
This form is due 30 days after File with the Chief Clerk of the		nomination papers, 68B.35(5) of the	e Iowa Code.
In completing this form, if sufficie information/answers by attaching	ent space is not provided g them to this form, using	for your answer, you may include acg a full size sheet of paper.	iditional
Division I. Business, Occupation, Pr	rofession.		
List each business, occupation, or profe your position or job title. No income thr	ession in which you are e reshold or time requirem	engaged, the nature of the business i ent applies.	if not evident, and
Examples: If you are employed by an individual, st position. If you are self-employed and are not income are self-employed, the nature of the	corporated or are not doi	ing business under a particular busin	ess name, state that
If you own your own corporation, are er state the name and nature of the business.	ess or corporation and vi	our position	cular business name
1. UPS-Transportation	on Jales - A	ecount Monager	
3			_ _
4			
5			_

Division II. Commissions from Sales of Goods or Services to Political Subdivisions.

INIS DAIT IS to be completed.	es to Political Subdivisions.
This part is to be completed only by Legislators. If you receiv goods or services to a political subdivision, state the name of commission earned is not required to be listed.	/ed income in the form of a commission from the calls of
commission earned is not required to be listed.	the purchasing political subdivision. The amount of
1. NA	a modify of
2	
3	
3	
3	
4	
45	
5	
5. <u> </u>	
6	
Division III. Sources of Gross Income.	
oddices of Gross Income.	
n each one of the fellowing	
evenue produced by the sategories list each source which p	produces more than 64 and .
In each one of the following categories list each source which prevenue produced by the source was subject to federal or state	income taxes last uses I in annual gross income, if the
annual gross income. Neith - the total of the poration, partnership	D. or other entity which
company, business, financial institution, corporation, partnership annual gross income. Neither the amount of income produced in the items. Do not report income received by your spouse or	nor value of the holding is required to be \$1,000 of
or spouse of	r other family members
Completing Division III.	
ercentage of ownership by the total revenue produced to determ Securities: State the partnership and the produced to determ Securities: State the partnership and th	ership of an asset is less than 100 persons.
are total revenue produced to determ	mine if you have reached the \$1,000 throat ald
. Securities: State the nature of the business of any company sterests that generate more than \$1,000 in annual gross income party are deemed received from a single carry.	the \$1,000 threshold.
nterests that generate more than \$1,000 in annual gross income ompany are deemed received from a single source.	in which you hold stock bonds or other name:
and only o double.	i a single
b/	
_ <i>[[A]</i>	
P/A	
	
Instruments of Financial Institutions: State the types of institutions	****
Instruments of Financial Institutions: State the types of institificates of deposit, savings accounts, etc., that produce annual loans, or credit unions.	tutions in which you hold financial instruments, such as
loans, or credit unions.	gross income in excess of \$1,000, e.g., banks, savings
	, 3 -
P/A	
1, 1/7	
	

C. Trusts: State the nature or type of any trust from which you receive more than \$1,000 of gross inc	ome annually.
N/A	
D. Real Estate: State the general nature of real estate interests that generate more than \$1,000 of grannually, e.g., residential leasehold interest or farm leasehold interest. The size or location of the proprequired to be listed.	oss income erty interest is not
MA	
E. Retirement Systems: State the name of each pension plan or other corporation or company that p\$1,000 annually in retirement benefits.	pays you more than
MA	
F. Other Income Categories Specified in State and Federal Income Tax Regulations.	
(Signature of Filer) (Date)	

Mail to: Chief Clerk's Office, IA House of Representatives, 1007 E. Grand Ave, Des Moines, IA 50319