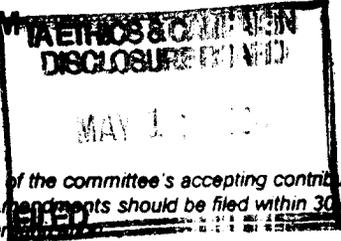


FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

- This is an **initial*** Statement of Organization
- This is an **amended*** Statement of Organization

*An initial Statement of Organization should be filed within 10 days of the committee's accepting contributions, making expenditures or incurring indebtedness exceeding \$500. Amendments should be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.



FORM DR-1 (Rev. 06/99)	STATEMENT OF ORGANIZATION <i>Appanoose</i>
For Office Use Only	
Comm. #	<u>17668</u>
Indexed	<u>sb</u>
Audited	
Computer	<u>sb</u>

COMMITTEE NAME (Required by law)

Committee to Elect Jody McDanel Supervisor

IMPORTANT: Indicate type of committee you are reporting for:

- (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 slate of candidates (list candidates under purpose of committee)

COMMITTEE TREASURER (Required by law) (This address used for all reminders and correspondence)

COMMITTEE CHAIR (List additional officers on separate page)

Name: Justine Heffron
 Mailing Address: 20452 205TH Ave.
 City, State Zip Code: Centerville, IA 52544
 Home Phone: (641) 437-7298
 Day Phone ()

Name: Susan McDanel
 Mailing Address: 24010 470TH ST
 City, State Zip Code: Centerville, IA 52544
 Home Phone: (641) 437-1129
 Day Phone ()

INDICATE PURPOSE OF COMMITTEE - Check One Box Advocate for/against candidate(s) Advocate for/against ballot issue(s)
 Comment or description:

All Candidates Enter:
 Office Sought: County Supervisor
 Political Party (if applicable): Democrat
 County/Local Candidates and Local Ballot/Franchise Committees Enter:
 County: Appanoose

District: _____
 Year Standing for Election: 2004
 Date of Election: NOV 2, 2004

Bank Account Name: McDanel For Supervisor
 Name of Financial Institution/Type of Account: Iowa Trust checking
 Mailing Address: 200 N. 10TH
 City State Zip: Centerville IA 52

Candidate Name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor:
Jody McDanel
 Mailing Address: 24010 470TH ST
 City State Zip: Centerville, IA 52544
 Home Phone: (641) 437-1129
 Day Phone ()

DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION

Indicate disposition of funds by marking appropriate number in box:

- 1) DONATED TO Appanoose COUNTY CENTRAL COMMITTEE
- 2) DONATED TO _____ LOCAL/STATE/NAT'L POLITICAL PARTY (underline one)
- 3) DONATED TO CHARITABLE ORGANIZATION (specify) _____
- 4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND (underline one)
- 5) PARTISAN CONGRESSIONAL DISTRICT FUND

- (6) PRORATED REFUND TO CONTRIBUTORS
- (7) TRANSFER TO ANOTHER COMMITTEE OF THIS SAME CANDIDATE (CANDIDATES ONLY)
- (8) RETURN TO PARENT ENTITY GENERAL FUND (PACs ONLY)
- (9) OTHER (PACs ONLY), PLEASE BE SPECIFIC

STATEMENT OF AFFIRMATION BY TREASURER AND CANDIDATE; OR POLITICAL COMMITTEES, BY CHAIRPERSON

I am aware that I am required to file disclosure reports if the committee receives contributions, makes expenditures, or incurs indebtedness in excess of \$500.00 in a calendar year to expressly advocate for any candidate or ballot issue. I understand that although the treasurer normally prepares and files reports, the candidate or chairperson (PACs) is responsible under the law for accurate and timely disclosure reports and that late-filed reports are subject to civil penalties and possible other legal action. I understand that by filing this form, I am subject to the laws found in Iowa Code chapter 56, chapter 68B and administrative rules found in chapter 351. I affirm that all committee officers have been informed of their appointment and obligations.

Signature of Treasurer: Justine Heffron
 Signature of Candidate OR, if PAC, Central Committee or Local Ballot Issue, Chairperson: Jody McDanel

Date Signed: 4-15-04
 Date Signed: 4-16-04