

FOR INSTRUCTIONS, SEE BACK OF FORM



DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 07/2003)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	9008
Logged In	rw
Scanned	
Computer	
Audited	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
**AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE**

**IMPORTANT:** Indicate type of committee you are reporting for:  7

( 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

**CANDIDATE COMMITTEES ONLY:**

Candidate Name	Political Party
Office Sought	District (If Senate or House)

OCT 15 2003

*Mary Ann Johanson*  
SIGNATURE OF TREASURER (or person filing this report)

712-563-3995  
TELEPHONE

10/16/03  
DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A JAN 1 - OCT 14 - 2003 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.  
(report date)

Indicate one  2

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 Notice of Dissolution 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. (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.) ..... \$ 58.60

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 948.04

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** ..... \$ 1,006.64

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ... 371.53

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)..... \$ 635.11

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)..... \$ \_\_\_\_\_

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... \$ \_\_\_\_\_

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)..... \$ \_\_\_\_\_

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES  NO

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

For Instructions, See Back of 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)  
 AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE

**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 FOR FUND-RAISER INCOME
7/13/03	ID# CK#	IRMA MADSEN BOX 215 KIMBALLTON IA 51543		\$ 25.00	<input checked="" type="checkbox"/>
7/13/03	ID# CK#	LILA JEAN JENSEN 711 CHICAGO ST AUDUBON IA 50025		35.00	<input checked="" type="checkbox"/>
7/13/03	ID# CK#	UNITEMIZED ITEMS		105.00	<input checked="" type="checkbox"/>
7/16/03	ID# CK#	J D MENDENHALL 1004 GRANDVIEW DR AUDUBON IA 50025		50.00	<input checked="" type="checkbox"/>
7/17/03	ID# CK#	JOSIE CLARK 1000 GRANDVIEW DR AUDUBON IA 50025		25.00	<input checked="" type="checkbox"/>
7/28/03	ID# CK#	FAIR POPCORN SALES		70.04	<input checked="" type="checkbox"/>
7/29/03	ID# CK#	UNITEMIZED ITEMS		20.00	<input checked="" type="checkbox"/>
9/28/03	ID# CK#	DALE EDWARDS 101 SEVENTH AVE AUDUBON IA 50025		25.00	<input checked="" type="checkbox"/>
9/16/2003	ID# CK#	UNITEMIZED ITEMS		5.00	<input checked="" type="checkbox"/>
9/28/03	ID# CK#	LORETTA CHRISTENSEN 401 W ODENSE KIMBALLTON IA 51543		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 385.04	<input checked="" type="checkbox"/>
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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.

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<b>SCHEDULE</b> <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)  
 AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE

**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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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
9/28/03	ID# CK#	VERNON VENTEJCHER 3040 GOLDFINCH PL BRAYTON IA 50042		\$40.00	<input checked="" type="checkbox"/>
9/28/03	ID# CK#	EIVIND LILLEHOJ BOX 22 KIMBALLTON IA 51543		150.00	<input checked="" type="checkbox"/>
9/28/03	ID# CK#	UNITEMIZED ITEMS		353.00	<input checked="" type="checkbox"/>
10/4/03	ID# CK#	UNITEMIZED ITEMS		20.00	<input checked="" 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>				\$ 563.00	✓
<b>TOTAL (if last page of this schedule)</b>				\$ 948.04	✓

\* 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.

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE</b> <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)  
AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE

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
7/2/03	ID# CK#	MARY LOU JOHANSEN 127 PACIFIC ST AUDUBON IA 50025	JULY 4TH PARADE CANDY	\$ 20.16
7/28/03	ID# CK#	AUDUBON DAIRY QUEEN 606 MARKET ST AUDUBON IA 50025	FAIR BOOTH PRIZE	5.00
7/28/03	ID# CK#	AUDUBON PIZZA HUT HWY 71 NORTH AUDUBON IA 50025	FAIR BOOTH PRIZE	5.00
8/19/03	ID# CK#	AUDUBON COUNTY FAIR BOARD AGRI HALL, AUDUBON IA 50025	FAIR BOOTH RENT	60.00
9/8/03	ID# CK#	AUDUBON MEDIA 301 BROADWAY AUDUBON IA 50025	THANK YOU AD FOR FAIR	39.00
10/1/03	ID# CK#	AUDUBON FOOD PRIDE 104 MARKET ST AUDUBON IA 50025	HAMBURGER & BUNS FALL FUNDRAISER	51.87
10/7/03	ID# CK#	AUDUBON FOOD PRIDE 104 MARKET ST AUDUBON IA 50025	HAMBURGER FALL FUNDRAISER	38.50
10/2/03	ID# CK#	AUDUBON MEDIA 301 BROADWAY AUDUBON IA 50025	FALL FUNDRAISER AD	52.00
SUB-TOTAL				\$ 271.53
<b>TOTAL (if last page of this schedule)</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.6(3)(I))

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
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COMMITTEE NAME (Must be same as on Statement of Organization)  
AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE

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
10/8/03	ID# CK#	KIMBALLTON CITY HALL KIMBALLTON IA 51543	FUNDRAISER RENT FOR HALL	\$ 100.00
	ID# CK#			
SUB-TOTAL				\$ 100.00
TOTAL (if last page of this schedule)				\$ 371.53

**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.6(3)(i).)