

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 \$750. Amendments should be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.

Benton

FORM **DR-1** STATEMENT OF ORGANIZATION
(Rev. 05/02)

For Office Use Only

Comm. # 17747
Indexed ✓
Audited ✓
Computer ✓

COMMITTEE NAME (Required by law)

PAID FOR BY COMMITTEE TO ELECT TERRY HERTLE 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 JUDITH HERTLE

Mailing Address 6680 27th AVE.

City, State Zip Code VINTON, IA 52349

Phone (319) 223-5595 (Newhall, IA)

e-Mail TLHJKH@aol.com

Name TERRY HERTLE

Mailing Address 6680 27th AVE

City, State Zip Code VINTON, IA 52349

Phone (319) 223-5595 (Newhall, IA)

e-Mail TLHJKH@aol.com

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: SUPERVISOR District: 2

Political Party (if applicable) DEMOCRAT Year Standing for Election: 2004

County/Local Candidates and Local Ballot/Franchise Committees Enter: County: BENTON Date of Election: NOV. 2, 2004

Bank Account Name TERRY HERTLE FOR SUPERVISOR

Name of Financial Institution/type of Account WATKINS SAVINGS BANK checking

Mailing Address 202 1st St.

City, State Zip WATKINS IA 52354

Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor

TERRY HERTLE

Mailing Address 6680 27th AVE.

City, State Zip VINTON, IA 52349

Phone (319) 223-5595 (Newhall, IA)

e-Mail TLHJKH@aol.com

DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION (Statement of intent required by law for all committees, except state parties and central committees and committees using only personal funds.)

- (1) DONATED TO _____ 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 \$750.00 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.

Judith K. Hertle
Signature of Treasurer

Terry Hertle
Signature of Candidate, OR, if PAC, Central Committee or Local Ballot Issue, Chairperson

July 27, 2004
Date Signed

July 27, 2004
Date Signed