

DISCLOSURE SUMMARY PAGE

Benton

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>21052</u>
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

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

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 _____ SEP 27 2004 _____ Political Party (if applicable) _____

Office Sought _____ District (if Senate or House) _____

Late reports are subject to possible civil and criminal penalties.

Darlyn Zulme 319-472-2373 9-24-04
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A September 24, 2004 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
5th day prior (report date) Indicate by #

- 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 <u>10-5-04</u>
County & Local Committees, enter County in which Election is held <u>Benton</u>

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.)	\$	<u>1087.58</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>5595.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0</u>
(Schedule H applies to Candidates' Committees Only)		
	SUB-TOTAL	\$ <u>6682.58</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....		<u>4020.96</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>2661.62</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>130.15</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	_____

For Instructions, See Back of 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)
Write for Kids

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
8-13-04	ID# CK#	William Owens 814 1st av. Vinton, Ia. 52349		\$ 100.00	<input type="checkbox"/>
8-13-04	ID# CK#	Darlys M. Zulme 108 Riverside Dr. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
8-13-04	ID# CK#	Farmers Savings Bank & Trust 401 B av. Vinton, Ia. 52349		250.00	<input type="checkbox"/>
8-23-04	ID# CK#	Helen Yundt 120 Glenic Drive Vinton, Ia. 52349		100.00	<input type="checkbox"/>
8-25-04	ID# CK#	Marsha Jety 2274 54th St. Dr. Mt. Auburn, Ia. 52313		100.00	<input type="checkbox"/>
8-25-04	ID# CK#	Sean P. Miller 1310 14th av. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
8-25-04	ID# CK#	Lynn M. Yundt 5538 - 24th av. Dr. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
8-25-04	ID# CK#	Christine S. Studer 1508 East 5th St. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
8-25-04	ID# CK#	Hiloon + Lite Insurance, Inc. 301 C. av. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
8-27-04	ID# CK#	Fraker Law Office 209 W. 4th St. Vinton, Ia. 52349		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1250.00	
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



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)
Write for Kids

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8-27-04	ID# CK#	Vinton Chiropractic Clinic 415 C. ave Vinton, Ia. 52349		\$ 200.00	<input type="checkbox"/>
8-28-04	ID# CK#	Cedar Valley Bank + Trust 405 W. 3rd St. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
8-31-04	ID# CK#	Frog Legs, Inc. P.O. Box 465 Vinton, Ia. 52349		100.00	<input type="checkbox"/>
8-31-04	ID# CK#	Kathy Akers 212 W. 4th St. Vinton, Ia. 52349		50.00	<input type="checkbox"/>
8-31-04	ID# CK#	Clingman Pharmacy, Inc. P.O. Box 600 Vinton, Ia. 52349		250.00	<input type="checkbox"/>
8-31-04	ID# CK#	Edwards Plumbing + Heating Vinton, Ia. 52349		50.00	<input type="checkbox"/>
9-2-04	ID# CK#	Pizza Ranch of Vinton 279 W. 4th St. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	Virginia Gay Hospital 500 N. 9th St. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	John's Quick Stop P.O. Box 457 Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	Johnson Auction Sales P.O. Box 545 Vinton, Ia. 52349		150.00	<input type="checkbox"/>
SUB-TOTAL				\$1200.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of 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)
Unite for Kids

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9-2-04	ID# CK#	<i>Gilbert S. Hansen Jr. 205 W. 4th St. Winton, Ia. 52349</i>		\$100.00	<input type="checkbox"/>
9-2-04	ID# CK#	<i>Kerdus, & Barrow, P.C. 205 W. 4th St. Winton, Ia. 52349</i>		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	<i>Fischer Law Firm, L.L.P. 110 East 4th St. Winton, Ia. 52349</i>		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	<i>Mc Dowells 420 2nd av. Winton, Ia. 52349</i>		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	<i>John A. Anderson 1511 Cedar Ridge Rd. Winton, Ia. 52349</i>		250.00	<input type="checkbox"/>
9-2-04	ID# CK#	<i>Mr. Alan Woodhouse 207 E. 4th St. Winton, Ia. 52349</i>		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	<i>Jeanne C. Mann 1521 Circle Dr. Winton, Ia. 52349</i>		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	<i>Keith A. Erwin 1518 Cedar Ridge Rd. Winton, Ia. 52349</i>		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	<i>Kyle Hummel 5758 - 20th av. Dr. Winton, Ia. 52349</i>		100.00	<input type="checkbox"/>
9-2-04	ID# CK#	<i>Kathy Jo. Tranel 297 Riverview Dr. Winton, Ia. 52349</i>		50.00	<input type="checkbox"/>
SUB-TOTAL				\$1100.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of 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)

Write for Kids

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9-2-04	ID# CK#	Joan Cooling 100 S 9th av. f Vinton, Ia. 52349		\$ 100.00	<input type="checkbox"/>
4-9-04	ID# CK#	Martin Eye Clinic 513 First ave. Vinton, Ia. 52349		50.00	<input type="checkbox"/>
9-9-04	ID# CK#	Trefz Photography 202 W. 4th St. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-9-04	ID# CK#	Lisa Cote - Schooley 307 A. ave. Vinton, Ia. 52349		50.00	<input type="checkbox"/>
9-13-04	ID# CK#	Unitemized Contribution		20.00	<input type="checkbox"/>
9-14-04	ID# CK#	Mike La Grange 5719 22 av. Dr. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-16-04	ID# CK#	manatt's, Inc. Box 535 Brooklyn Ia. 52211		100.00	<input type="checkbox"/>
9-16-04	ID# CK#	A+B auto Parts, Inc. 207 W. 3rd St. Vinton, Ia. 52349		50.00	<input type="checkbox"/>
9-17-04	ID# CK#	Travis True Value Hardware, Inc. 112 W. 4th St. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-22-04	ID# CK#	Steve Copley 5767 22 av. Dr. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 770.00	
TOTAL (if last page of this schedule)				\$	

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<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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COMMITTEE NAME (Must be same as on Statement of Organization)
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9-22-04	ID# CK#	R.J. Ender Computers 511-1st av. Vinton, Ia. 52349		\$ 100.00	<input type="checkbox"/>
9-22-04	ID# CK#	Bitterton Family Chiropractic 411 A av. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-22-04	ID# CK#	Phillips Funeral Homes, Inc. 212 E. 6th St. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-22-04	ID# CK#	Craig Buffett Ford, Inc. 1101 W. 9th St. Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-22-04	ID# CK#	John's Tire Service 215-1st av. Vinton, Ia. 52349		50.00	<input type="checkbox"/>
9-22-04	ID# CK#	Car Pac, Inc. PO Box 1921 Vinton, Ia. 52349		100.00	<input type="checkbox"/>
9-22-04	ID# CK#	U.S. Bank 110 West 4th St. Vinton, Ia. 52349		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 750.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of 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)

Write for Kids

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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
9-22-04	ID# CK#	<i>Jonathon Q. Clingman 1224 E. 4th St. Vinton, Ia. 52349</i>		\$ 250.00	<input type="checkbox"/>
9-22-04	ID# CK#	<i>Leon's Malt Shop 210 N. K av. Vinton, Ia. 52349</i>		100.00	<input type="checkbox"/>
9-22-04	ID# CK#	<i>Michael + Rowd 102 E. 4th Vinton, Ia. 52349</i>		50.00	<input type="checkbox"/>
9-23-04	ID# CK#	<i>Thay Design + Lettering to Angie Thay 305 A. ave, Vinton, Ia. 52349</i>		125.00	<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"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL \$525.00

TOTAL (if last page of this schedule) \$5595.00

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FOR INSTRUCTIONS, SEE BACK OF FORM



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

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

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
8-17-04	ID# CK# 1001	Vinton Post Office Vinton, Iowa 52349	6 month rental post office box	\$ 21.00
8-26-04	ID# CK# 1002	Lamar Companies 2712 Falls ave. Waterloo, Ia. 50701	outdoor billboard advertising display 30 days	410.00
8-27-04	ID# CK# 1003	Vinton Post Office Vinton, Ia. 52349	postage stamps	67.00
8-31-04	ID# CK# 1004	Cedar River Ink 217 N. 4th St. Vinton, Ia. 52349	1,000 buttons Unite for Kids	67.58
9-9-04	ID# CK# 1005	Cedar River Ink 217 N. 4th St. Vinton, Ia. 52349	5,000 brochures	265.00
9-23-04	ID# CK# 1006	Thayp Design 305 1/2 ave. Vinton, Ia. 52349	500 yard signs + stakes 10 Banners	2782.50
9-24-04	ID# CK# 1007	Cedar River Ink 217 N. 4th St. Vinton, Ia. 52349	7000 Flyers 300 Letters	407.98
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 4020.96

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

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

Write for Kids

SCHEDULE
E
(Rev. 06/97) IN KIND
CONTRIBUTIONS

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
8-26-04	<i>Open Office Supply P.O. Box 477 Vinton, Ia. 52349</i>		<i>paper for brochure 5,000 sheets</i>	\$ <i>130.15</i>	<input 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"/>
					<input type="checkbox"/>

SUB-TOTAL \$

TOTAL (if last page of this schedule) \$

130.15

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