

Notice of Dissolution



FORM	(Rev. 07/03)
DR-3 NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	_____
Indexed	_____
Audited	_____
Computer	_____
Certified Date of Dissolution	_____

NOV 24 2003

COMMITTEE NAME

<i>Committee to Elect John A. Koncinski</i>		
Official Name of Committee		
<i>511 Albany St.</i>		
Street		
<i>Waterloo</i>	<i>Iowa</i>	<i>50703</i>
City, State, Zip Code		
<i>319</i>	<i>234-2961</i>	
Area Code	Telephone	-

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

11-24-03

Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect John A Kencaud

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 Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name <u>John A Kencaud</u>	Political Party _____
Office Sought <u>City Council Waterloo IA</u>	District (if Senate or House) _____

NOV 24 2003

Robert Kencaud 319-234-2961 11-24-03
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE 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 _____ REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate one

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.)\$ 0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 915.00

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.....\$ 915.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 915.00

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)\$ 0

**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 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)
Committee to Elect John Kincaid

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
10/13/03	ID# CK# 4660	20 Box 1297 Waterloo 50704 <i>Mena Jordan-Berg</i>	Friend	\$ 100.00	<input type="checkbox"/>
9/10/03	ID# CK# 1509	Pattern Mahr # 2856 Waterloo IA Pattern Entertainment Me + A SW		\$ 500.00	<input type="checkbox"/>
10/1/03	ID# CK# 8729	James E Walsh Jr PO Box 596 Waterloo IA 50704	Friend	100.00	<input type="checkbox"/>
10/15/03	ID# CK# 02159	Waterloo Women's Club PO Box 2342 Waterloo IA 50704		15.00	<input type="checkbox"/>
10/30/03	ID# CK# 6880	Jimmie or Lou Pater 1322 North St Waterloo	Friend	50.00	<input type="checkbox"/>
10/31/03	ID# CK# 1696	Ed Olson 1409 Renell St. Waterloo IA 50703	Neighbor	100.00	<input type="checkbox"/>
11/4/03	ID# CK# 2981	Bob Kincaid 511 Albany St. Waterloo IA 50703	Brother	500.00	<input type="checkbox"/>
	ID# CK#	-			<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL **\$915.00**

TOTAL (if last page of this schedule) **\$915.00**

* 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



EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
Committee to Elect John A Kincaid

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
10/24/03	ID# CK#	<i>Signs + Design</i>	<i>yard signs</i>	\$432.28
10/31/03	ID# CK#	<i>Signs + Design</i>	<i>yard signs</i>	108.07
11-16-03	ID# CK# 100 1	<i>Greg Kincaid Reimbursement for labels 511 Albany St. Waterloo IA</i>	<i>Reimbursement for labels from Black Hawk County Election Office</i>	27.00
11-16-03	ID# CK# 100 2	<i>John Kincaid 1518 Newell St. Waterloo IA 50703</i>	<i>Reimbursements for Political odds + stamps</i>	250.00
11-5-03	ID# CK#	<i>Union Plaster Bank: 3B Park Ave E Waterloo IA 50703</i>	<i>Checks for account</i>	15.30
11-24-03	ID# CK# 100 3	<i>Jesse Casby Neighborhood Center 1112 Mobile St. Waterloo IA 50703</i>	<i>Closures of account donation</i>	82.35
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$915.00
TOTAL (if last page of this schedule)				\$915.00

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)(j).)

