FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

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 FOR PASSAGE OF BELMOND-KLEMME BOND REFERENDUM

IMPORTANT: Indicate type of committee you are reporting for: (6)

(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

CANDIDATE COMMITTEES ONLY:

Candidate Name _____ Political Party _____

Office Sought _____ District (if Senate or House) _____

APR - 5 2004

Russell A. Talbot
SIGNATURE OF TREASURER (or person filing this report)

(641) 444.4269
TELEPHONE

04.01.04
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~~ an APRIL 1, 2004 REPORT FOR AN ~~A~~ **(1) ELECTION /(2)NON-ELECTION** YEAR.
(report date) Indicate one (1)

☐ 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
March 9, 2004

County & Local Committees, enter County in which Election is held
Wright

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.) ..... $	996.58
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1,814.00
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 ..... $	2,810.58
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....	2,324.59
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) ..... $	485.99

****UNPAID BILLS** (From Schedule D - Attach Schedule D)..... $	
***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... $	8.51
****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

Reset Form

SCHEDULE **A** (Rev. 07/03)	MONETARY RECEIPTS
☐ 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 FOR PASSAGE OF BELMOND-KLEMME BOND REFERENI

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
02-29-04	ID# CK#	ANGIE KINSETH 216 5th Avenue NE Belmond, IA 50421		$ 100.00	☐
03-02-04	ID# CK#	RUTH JOHNSON 2230 130th Street Belmond, IA 50421		9.00	☐
03-02-04	ID# CK#	DOUG WHITE 511 3rd Street NE Belmond, IA 50421		10.00	☐
03-02-04	ID# CK#	JUDY LARSON 304 4th Avenue SW Belmond, IA 50421		10.00	☐
03-02-04	ID# CK#	KIEJA EVANS 1020 Windsor Place Belmond, IA 50421		15.00	☐
03-02-04	ID# CK#	AMY L. CLABAUGH 314 East Iowa Street Klemme, IA 50449		25.00	☐
03-02-04	ID# CK#	TERRY R. ANDERSON 2025 Timber Way Goodell, IA 50439-7532		30.00	☐
03-02-04	ID# CK#	DEBRA K. JENISON 315 7th Avenue SE Belmond, IA 50421		50.00	☐
03-02-04	ID# CK#	WANDA TORKELSON 2855 Taft Avenue Garner, IA 50438		50.00	☐
03-04-04	ID# CK#	MARNE MARKWARDT 113 North 15th Street Clear Lake, IA 50428		10.00	☐
			SUB-TOTAL	$ 309.00	
			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

Reset Form

SCHEDULE **A** (Rev. 07/03)	MONETARY RECEIPTS
☐ 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 FOR PASSAGE OF BELMOND-KLEMME BOND REFERENDU

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
03-04-04	ID# CK#	PAT J. BOHNING 1560 Tyrrell Lane Belmond, IA 50421-7575		$ 50.00	☐
03-04-04	ID# CK#	GARY L. BERKLAND 304 4th Avenue NW Belmond, IA 50421		300.00	☐
03-04-04	ID# CK#	BRADLEY W. ROBSON 1012 Windsor Place Belmond, IA 50421		200.00	☐
03-04-04	ID# CK#	TERRI M. HAVENS 1404 Bel City Lane Belmond, IA 50421		100.00	☐
03-04-04	ID# CK#	MARC GABRIELSON 404 Third Avenue NE Belmond, IA 50421-1228		100.00	☐
03-04-04	ID# CK#	BRADLEY A. BLOEMKE 1104 Windsor Place Belmond, IA 50421-9740		20.00	☐
03-04-04	ID# CK#	AVIS B. HOWELL 216 Third Avenue SE Belmond, IA 50421-1218		80.00	☐
03-04-04	ID# CK#	LORA L. and RUSSELL G. TALBOT 418 SE 11th Ankeny, IA 50021-1218		100.00	☐
03-04-04	ID# CK#	TENOLD CHIROPRACTIC CLINIC 406 River Avenue North Belmond, IA 50421-1039		100.00	☐
03-05-04	ID# CK#	DUGGER FUNERAL HOMES, INC. 111 Luick Lane South, P. O. Box 233 Belmond, IA 50421		100.00	☐
			SUB-TOTAL	$ 1,150.00	
			TOTAL ***(if last page of this schedule)***	$	

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For Instructions, See Back of Form

Reset Form

SCHEDULE **A** (Rev. 07/03)	MONETARY RECEIPTS
☐ 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 FOR PASSAGE OF BELMOND-KLEMME BOND REFERENDU

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
03-05-04	ID# CK#	TODD A. BUSEMAN 103 5th Avenue SW Belmond, IA 50421-9509		$ 25.00	☐
03-05-04	ID# CK#	DIANE SANDMAN 1518 Tyrrell Lane Belmond, IA 50421		30.00	☐
03-05-04	ID# CK#	GENE PALS FARMS, LTD. 3070 110th Street Belmond, IA 50421-7510		100.00	☐
03-07-04	ID# CK#	P & G MARKET COMPANY 403 East Main Street Belmond, IA 50421		100.00	☐
03-17-04	ID# CK#	BILL D. MASKE 211 Luick Lane South Belmond, IA 50421		100.00	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
			SUB-TOTAL	$ 355.00	
			TOTAL ***(if last page of this schedule)***	$ 1,814.00	

* 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

Reset Form

SCHEDULE **B** (Rev. 07/03)	MONETARY EXPENDITURES

☐ 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)*

COMMITTEE FOR PASSAGE OF BELMOND-KLEMME BOND REFERENDUM

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
03-04-04	ID# CK#0015	KLMJ FM 104.9 1509 4th Street NE, P. O. Box 495 Hampton, IA 50441	Radio Advertising 03-05--03-09-04	$ 80.00
03-05-04	ID# CK#0016	PRINTING SERVICES, INC. 524 River Avenue North Belmond, IA 50421	Brochures	950.25
03-05-04	ID# CK#0017	(Same as above)	Advertising--Reminder 02-19-04	187.20
03-05-04	ID# CK#0018	(Same as above)	Specialty Paper--8 1/2 x 11"	4.00
03-12-04	ID# CK#0019	(Same as above)	Advertising--Reminder 02-26-04	503.10
03-12-04	ID# CK#0020	(Same as above)	Advertising--Reminder 03-04-04 After Adjustments	180.24
03-12-04	ID# CK#0021	(Same as above)	Advertising--Reminder 02-12-04	93.60
03-14-04	ID# CK#0022	BELMOND INDEPENDENT 215 East Main Street Belmond, IA 50421	Local Advertising 03-04-04 After Adjustments	326.20
			SUB-TOTAL	$ 2,324.59
			TOTAL *(if last page of this schedule)*	$ 2,324.59

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)*
COMMITTEE FOR PASSAGE OF BELMOND-KLEMME BOND REFERENDUM

Reset Form

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
03-08-04	LAVON TANNER 1116 Windsor Place Belmond, IA 50421		Postage: Stamps 23 @ $ .37	$ 8.51	☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
			SUB-TOTAL	$	
			TOTAL (if last page of this schedule)	$ 8.51	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.