

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

Reset Form

*Black Hawk*

<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	<u>21329</u>
Logged In	<u>SM</u>
Scanned	
Computer	<u>SM</u>
Audited	

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

La Porte City Family Aquatic Center

JUN 27 2005

IMPORTANT: Indicate by # type of committee you are reporting for: 9 PM 6.23.05  
 (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	Political Party (if applicable)
Office Sought	District (if Senate or House)

Late reports are subject to possible civil and criminal penalties.

Ann Whittlesey  
SIGNATURE OF PERSON FILING REPORT

(319)342-3977  
TELEPHONE

6/22/05  
DATE SIGNED

I AM FILING A 6/23/05 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
 (report date) Indicate by #  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 DR-3 is filed.)

Local Committees, enter Date of Election <u>6/28/05</u>
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. (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.) ..... \$ 0.00 ✓

### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 2659.03 ✓

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 ..... \$ 2659.03

### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... 1359.61 ✓

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) ..... \$ 1299.42 ✓

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) ..... \$ 734.97 ✓

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... \$ 250.00 ✓

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... \$ 0.00

### 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

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
 La Porte City Family Aquatic Center

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**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
05/20/05	ID# CK# 007828	City of La Porte City 202 Main Street La Porte City, IA 50651		\$2,659.03	<input type="checkbox"/>
	ID# CK#	(Monies held over from previous Aquatic Center Committee) <i>ck</i>			<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 2659.03	
<b>TOTAL (if last page of this schedule)</b>				\$ 2,659.03	

\* 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

**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.

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

COMMITTEE NAME (Must be same as on Statement of Organization)  
La Porte City Family Aquatic Center

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
6/6/05	ID# CK#100	Becky Clark 1020 McQuilken Ave. La Porte City, IA 50651	Reimbursement - Prizes for Aquatic Center Coloring Contest (Pool toys)	\$ 30.69
6/6/05	ID# CK#01	La Porte City Printing & Design, Inc. 313 Main Street La Porte City, IA 50651	Display board for presentations, copies for handouts, copies and postage for mass mailing	372.20
6/14/05	ID# CK#102	La Porte City Printing & Design, Inc. 313 Main Street La Porte City, IA 50651	Copies and postage for rural mailing	206.72
6/15/05	ID# CK#103	City of La Porte City 202 Main Street La Porte City, IA 50651	Reimbursement - Community Attraction and Tourism grant writing fee paid to INRCOG	750.00
	ID# CK#			
SUB-TOTAL				\$ 1359.61
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 1,359.61</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.402(3)(i).)

<b>SCHEDULE</b> <b>D</b> (Rev. 08/98)	<b>INCURRED</b> <b>INDEBTEDNESS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME (Must be same as on Statement of Organization)**  
 La Porte City Family Aquatic Center

**NOTE:** Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
 (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
6/5/05	LAMAR PO Box 96030 Baton Rouge, LA 70896	Billboard to promote referendum	\$ 330.00
6/8/05	Sarah Craft 10 Bruce Lane La Porte City, IA 50651	Reimbursement - Yard signs promoting referendum - qty 100	313.01
6/9/05	Matt Craft 10 Bruce Lane La Porte City, IA 50651	Reimbursement - Voter registration list purchased from Black Hawk County Election Office	10.00
6/13/05	Becky Clark 1020 McQuilken Ave. La Porte City, IA 50651	Reimbursement - Poster Board & Supplies for Parade Float	13.93
6/17/05	Becky Clark 1020 McQuilken Ave La Porte City, IA 50651	Reimbursement - Candy for parade float	23.03
6/17/05	Becky Clark 1020 McQuilken Ave. La Porte City, IA 50651	Reimbursement - Costume Rental for parade float	45.00
<b>SUB-TOTAL</b>			<b>\$ 734.97</b>
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			<b>\$ 734.97 ✓</b>

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**  
 \*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

<b>SCHEDULE E</b> (Rev. 06/97)	<b>IN-KIND CONTRIBUTIONS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

La Porte City Family Aquatic Center

Reset 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
6/6/05	La Porte City Printing & Design, Inc. 313 Main Street La Porte City, IA 50651		Use of Postal Permit for multiple bulk mailings	\$ 250.00	<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"/>
<b>SUB-TOTAL</b>				\$ 250.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 250.00 ✓	

\*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.