

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
 MAY 21 2004
 FILED

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)

CITIZENS TO ELECT COLEMAN FOR SHERIFF

IMPORTANT: Indicate type of committee you are reporting for: 4

(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 JEFF COLEMAN Political Party REP
 Office Sought SHERIFF District (If Senate or House) _____

Jeff Coleman
 SIGNATURE OF TREASURER (or person filing this report)

(319) 636-2177
 TELEPHONE

FILED 5-21-04
 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 5-19-04 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
11-02-04
 County & Local Committees, enter County in which Election is held
BUCHANAN

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.) \$ 512.87

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see In-kind below) 2060.00

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 \$ 2572.87

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 1117.58

Schedule F: Loan Repayments total (Attach Schedule F) 462.70

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) \$ 992.59

**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

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)
CITIZENS TO ELECT COLEMAN FOR SHERIFF.

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 88B 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
1/27/04	ID# CK# 8920	Fred Steinbron 2327 Benson Shady Grove Rd Jessup		\$ 100.00	<input type="checkbox"/>
2/20/04	ID# CK# 6177	Dave Derflinger 11724 35th St Stanley		100.00	<input type="checkbox"/>
2/25/04	ID# CK# Cash	Joe Bagby 702 8th St NE Independence		500.00	<input type="checkbox"/>
3/29/04	ID# CK# 3453	Eleanor Coleman 508 8th Ave NE, Delwaco		500.00	<input type="checkbox"/>
3/25/04	ID# CK# 5571	Bob Richards 1314 35th NE, Independence		50.00	<input type="checkbox"/>
4/08/04	ID# CK# 3216	Burgo Tractor Account 1537 Kentucky Ave Hazleton		500.00	<input type="checkbox"/>
4/10/04	ID# CK# Cash	Mary Terry 506 9th Ave SW		100.00	<input type="checkbox"/>
4/12/04	ID# CK# Cash	Suzette Kramer 2064 3 Elms Rd, Independence		60.00	<input type="checkbox"/>
4/12/04	ID# CK# 2399	Stephen Elliott 408 Ridgerview Dr SE Independence		50.00	<input type="checkbox"/>
5/1/04	ID# CK# 2823	Don Hirsch 604 Main St Brandon IA		100.00	<input type="checkbox"/>

SUB-TOTAL

\$ 2060

TOTAL (If last page of this schedule)

\$ 2060

* 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

Resol 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)
CITIZENS TO ELECT COLEMAN FOR SHERIFF COMM.

DATE EXPENDED (MM/DD/YYR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1.21.04	ID# CK#	BUCHANAN CO. AUDITOR 210 5TH AVE NE INDEPENDENCE IA 50644	VOTER REGISTRATION LIST	\$ 64.13
3.25.04	ID# CK#	WILSON PHOTOGRAPHY DELWEIN IA 50662	PHOTO'S & CD photo's	50.83
4.14.04	ID# CK#	Rite Price Office Supply DELWEIN IA 50662	STAPLER FOR SIGNS	34.23
4.15.04	ID# CK#	RITE PRICE 214 S FREDERICK DELWEIN IA 50662	STAPLER/STAPLES	44.48
5.3.04	ID# CK#	PRINT EXPRESS 201 320 AVE SE INDEE IA 50644	NAME BADGES	34.60
5.13.04	ID# CK#	LAMONT SIGN CO 335 PINE ST LAMONT IA 50656	SIGNS	845.30
	ID# CK#	MAINARD SAVINGS BANK PO BOX 90 HAZLETON IA 50641	SERVICE CHARGES SALES TAX	44.01
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1117.58

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)(l))

FOR INSTRUCTIONS, SEE BACK OF FORM

Rec'd Form

COMMITTEE NAME (Must be same as on Statement of Organization)
CITIZENS TO ELECT COLEMAN FOR SHERIFF COMM.

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAYED
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ _____

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
			\$

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
1/14/04	JEFF COLEMAN MAYNARD SAVINGS BANK		\$ 231.35
12/15/04	"		231.35

TOTAL (PART I) \$ 0

TOTAL CASH REPAYMENTS (PART II) \$ 462.70

From Schedule E - TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ _____

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MAY-21-04 02:06 PM HAZLETON, CITY HALL 319 656 2523 P.05