

# DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 02/96)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # <u>9021</u>	
Indexed <u>SW</u>	
Audited _____	
Computer _____	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
**BUENA VISTA COUNTY**  
**REPUBLICAN CENTRAL COMMITTEE**

**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 State of Candidates

Bryan B. Bunker 712-732-2663 10/15/03  
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE DATE SIGNED

### Penalties Due For Late Filed Reports Range from \$10 to \$400

#### SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 10/20/03 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate one:  1

OCT 17 2003

CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

Local Committees, enter Date of Election \_\_\_\_\_

County & Local Committees, enter County in which Election is held \_\_\_\_\_

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.)

### 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 <b>MUST</b> 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>1149.71</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A)		<u>4561.03</u>
Schedule C: Fund-raising Events total (Attach Schedule C)		_____
Schedule F: Loans Received total (Attach Schedule F)		_____
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		_____
<u>(Schedule H applies to Candidates' Committees Only)</u>		
<b>SUB-TOTAL .....</b>	<b>\$</b>	<u>5710.74</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B)		<u>2497.54</u>
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)	\$	<u>3213.20</u>

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) ..... \$ \_\_\_\_\_

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 02/96)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

**BUENA VISTA COUNTY**

**REPUBLICAN CENTRAL COMMITTEE**

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
1/23/03	ID# CK#	MARLOWE FELDMAN 1980 490TH ST ALBERT CITY, IA 50510	none	\$ 100-
1/23/03	ID# CK#	ARLENE THOMPSON 315 E. 9TH ST STORM LAKE IA 50588	none	100-
1/23/03	ID# CK#	GARY LALONE 163 S. COVE STORM LAKE, IA 50588	none	100-
1/23/03	ID# CK#	KAREN M. STRAWN 303 E. LAKESHORE STORM LAKE, IA 50588	none	100-
1/23/03	ID# CK#	RUSSEL EDDIE 1101 PIERCE DR. STORM LAKE, IA 50588	none	100-
1/23/03	ID# CK#	M. JANE GERMAN 520 W. 5TH APT #8 STORM LAKE, IA 50588	none	50-
1/23/03	ID# CK#	LOUISE GINGERICH 1117 LINCOLN ROAD STORM LAKE, IA 50588	none	50-
1/23/03	ID# CK#	FREEMAN FOR SENATE MARY LOU FREEMAN 203 LAKE CREEK ROAD ALTA, IA 51002	SENATOR	100-
1/23/03	ID# CK#	PHILIP E. HAUVENS 510 ANGLIER DR. STORM LAKE, IA 50588	none	100-
1/23/03	ID# CK#	JAMES P. HULTGREN 162 560TH ST ALTA, IA 51002	none	100-

SUB-TOTAL

\$ 900-

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) (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.

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 02/96)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
 BUENA VISTA COUNTY  
 REPUBLICAN CENTRAL COMMITTEE

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1/23/03	ID# CK#	RANDAL SIEVERS 5626 175th Ave STORM LAKE, IA 50588	none	\$ 100-
1/23/03	ID# CK#	DENNIS L. WEBER 510 ALTA VISTA ALTA IA. 51002	none	100-
1/23/03	ID# CK#	ANN PETERSON PYLE 6352 HWY 71 S. STORM LAKE, IA 50588	none	100-
1/23/03	ID# CK#	CECIL W. CHINDLAND 517 SMALLUM DR. STORM LAKE, IA 50588	none	100
1/23/03	ID# CK#	WILLIAM R. LANPHERE 177 STONEY PT. DR. STORM LAKE, IA 50588	County supervisor	100-
7/25/03	ID# CK#	QWEST COMMUNICATION 5325 ZUM ST RM 728 REFUND DENVER, CO 80221	none	353.61
4/8/03	ID# CK#	JAMES C. TREAT 319 W. 9th ST STORM LAKE, IA 50588	none	100-
4/8/03	ID# CK#	ROLLIE KRUSE 5311 180th AVE ALBERT CITY IA. 50510	none	125- <del>100-</del>
4/8/03	ID# CK#	HARRY E. MELANDER 310 MAIN ST. ALTA IA 51002	none	100-
4/8/03	ID# CK#	BILL PATTON 608 GENESEO ST. STORM LAKE, IA 50588	none	100-

SUB-TOTAL

\$ 1278.61

TOTAL (if last page of this schedule)

\$

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 02/96)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
**BUENA VISTA COUNTY  
 REPUBLICAN CENTRAL COMMITTEE**

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.

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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
4/8/03	ID# CK#	ROBERT O'BRIEN 912 N. MAE STORM LAKE, IA 50588	none	\$ 100-
4/8/03	ID# CK#	JAMES M. PRICHARD 1301 W. 6TH STORM LAKE, IA 50588	none	100-
4/8/03	ID# CK#	CLAYTON CHRISTENSEN 3010 LEONA DR. STORM LAKE, IA 50588	none	100-
4/8/03	ID# CK#	GLEN HUNTINGTON 727 HWY 7 STORM LAKE, IA 50588	none	100-
4/8/03	ID# CK#	DWIGHT YOUNG 202 W. 3RD ST STORM LAKE, IA 50588	none	100-
4/8/03	ID# CK#	GENE LYSTER 123 S. COVE STORM LAKE, IA 50588	none	100
4/8/03	ID# CK#	DR. KEITH W. PIERCE 901 EMERALD DR. STORM LAKE, IA 50588	none	100-
4/8/03	ID# CK#	GARY SLIEFFERT 11 VISTA DR. STORM LAKE, IA 50588	none	100-
4/8/03	ID# CK#	NANCY HALL 20 ST. ANDREWS DR. STORM LAKE, IA 50588	none	100-
4/8/03	ID# CK#	UNITEMIZED CONTRIBUTIONS	none	275-
SUB-TOTAL				\$ 1175-
TOTAL (if last page of this schedule)				\$

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**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 02/96)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
**BUENA VISTA COUNTY  
 REPUBLICAN CENTRAL COMMITTEE**

**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
2/7/03	ID# CK#	REPUBLICAN PARTY OF IOWA 621 E. 9TH ST DES MOINES IA 50309	none	\$ 568.92
4/30/03	ID# CK#	DONALD PETERSON 113 W. LINKS DR. ALTA IA 51002	none	100-
4/30/03	ID# CK#	UNITEMIZED CONTR	none	220-
10/6/03	ID# CK#	DOUGLAS J. LARSON 216 CASINO ROAD STORM LAKE, IA 50588	none	100-
10/6/03	ID# CK#	UNITEMIZED CONTR	none	218.50
	ID# CK#			

SUB-TOTAL

\$ 1207.42

TOTAL (if last page of this schedule)

\$ 4561.03

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SCHEDULE <b>B</b> (Rev. 02/96)	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)  
**QUEEN VISTA COUNTY  
 REPUBLICAN CENTRAL COMMITTEE**

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (CANDIDATES SEE BELOW & ENTER 1,2,3)	AMOUNT EXPENDED
1/21/03	ID# CK#	PANTRY CAFE N. LAKE AVE STORM LAKE, IA 50588	RAIL SPLITTER ( ) BREAKFAST	187.85 \$
2/2/03	ID# CK#	MICHAEL ROSS PO BOX 15 ALBERT CITY IA 50510	REIMBURSE HQ ( ) PHONE DEPOSIT	600-
3/26/03	ID# CK#	ABNER BELLS 210 E. 5TH ST. STORM LAKE, IA 50588	RENT ROOM ( )	28.63
4/2/03	ID# CK#	US POSTAL SERVICE STORM LAKE IA 50588	STAMPS ( )	222-
3/30/03	ID# CK#	ALBERT CITY PRINTING 125 MAIN ST. ALBERT CITY IA 50510	ENVELOPES ( )	39.75
3/30/03	ID# CK#	MICHAEL ROSS PO BOX 15 ALBERT CITY IA. 50510	REIMBURSE HQ ( ) RENT	196.46
5/15/03	ID# CK#	GROUNDWELL DIRECT BOX 218 ALBERT CITY IA. 50510	COPIES ( )	67.16
SUB-TOTAL				\$ 1341.85
TOTAL (if last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Campaign funds may be used only for:  
 (1) campaign purposes,  
 (2) constituency expenses, and  
 (3) educational and other expenses associated with duties of office.

Please insert the applicable number in the purpose column for each expenditure.

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 56.6(3)(i).)

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 02/96)	MONETARY EXPENDITURES
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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)  
**BUENA VISTA COUNTY  
 REPUBLICAN CENTRAL COMMITTEE**

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (CANDIDATES SEE BELOW & ENTER 1,2,3)	AMOUNT EXPENDED
5/27/03	ID# CK#	BUENA VISTA CO FAIR ALTA IOWA 51002	BOOTH RENT	\$50-
6/10/03	ID# CK#	MICHAEL ROSS PO BOX 15 ALBERT CITY, IA. 50510	POSTAGE	185-
6/26/03	ID# CK#	MICHAEL ROSS P.O. BOX 15 ALBERT CITY, IA 50510	T SHIRTS	646.60
11/6/03	ID# CK#	DICOBIE TAPES 1020 LINCOLN ROAD BELLEVUE, NE 68005-0200	PATRIOTIC CEREMONY	274.09
	ID# CK#		( )	
	ID# CK#		( )	
	ID# CK#		( )	

SUB-TOTAL \$1155.69  
 TOTAL (if last page of this schedule) \$2497.54

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Campaign funds may be used only for:  
 (1) campaign purposes,  
 (2) constituency expenses, and  
 (3) educational and other expenses associated with duties of office.

Please insert the applicable number in the purpose column for each expenditure.

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 56.6(3)(i).)