

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	9021
Logged In	/
Scanned	
Computer	
Audited	

COMMITTEE **BUENA VISTA COUNTY** (Statement of Organization)
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 Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name _____ Political Party _____
Office Sought _____ District (if Senate or House) _____

Rudolf B. ... **ALD** 712-732-2663 1/20/05
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 1/20/05 REPORT FOR ANA (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
BUENA VISTA

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.) \$ 5301.01

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 413.15

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 \$ 5714.16

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 1349.15

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) \$ 4365.01

**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) \$ _____

Instructions, See Back of Form

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

SCHEDULE A (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
10/25/04	ID# CK#	UNITEMIZED CONTRIBUTIONS	DONATION	\$ 110-
11/2/04	ID# CK#	DR. JOHN R. GOULDIN 904 FLINDT DR. STORM LAKE, IA. 50588	DONATION	50-
11/12/04	ID# CK#	UNITEMIZED CONTRIBUTION	DONATION	40-
12/8/04	ID# CK#	UNITEMIZED CONTRIBUTION	DONATIONS	213.15
	ID# CK#			
SUB-TOTAL				\$ 413.15
TOTAL (if last page of this schedule)				\$ 413.15

* 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.

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SCHEDULE 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) **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
10/22/04	ID# CK#	ABNER BELLS 210 E. 5th ST STORM LAKE, IA 50588	BARB GRASSLEY EVENT	50.62 \$
10/25/04	ID# CK#	ABNER BELLS 210 E. 5th ST. STORM LAKE, IA. 50588	TIP	8-
10/25/04	ID# CK#	MICHAEL ROSS P.O. Box 15 ALBERT CITY, IA 50510	POSTAGE	444-
10/27/04	ID# CK#	B.V. CO. AUDITOR Box 220 STORM LAKE, IA. 50588	REGISTRATION LIST	20-
10/26/04	ID# CK#	STATE OF IOWA SEC. OF STATE ACCTS PAYABLE REC LUCAS ST. OFFICE BLDG. 1ST FLOOR DES MOINES, IA 50317	VOTER LIST	16.46
11/3/04	ID# CK#	MICHAEL ROSS BOX 15 ALBERT CITY, IA. 50510	ELECTION SUPPLIES	153.87
11/1/04	ID# CK#	JANE GERMAN 1520 W. 6th ST STORM LAKE, IA 50588	ELECTION EXPENSE	6.30
SUB-TOTAL				\$ 699.21
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).)

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

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1/4/04	ID# CK#	B. V. COLLEGE REPUBLICANS 610 W 4TH ST STORM LAKE, IA 50588	DONATION ()	\$ 200-
11/5/04	ID# CK#	GLADYS EDDIE 1101 PIERCE DR. STORM LAKE, IA. 50588	ELECTION SUPPLIES)	137.75
11/14/04	ID# CK#	ROGER + JULIE EGLAND 110 GRAND AVE STORM LAKE, IA 50588	H Q RENT ()	75-
12/7/04	ID# CK#	UPPER DES MOINES OPPORTUNITY 620 MICHIGAN ST. STORM LAKE, IA 50588	DONATION ()	177.86
12/7/04	ID# CK#	THE LORDS CUPBOARD ATT. SUE GEYER 218 PROSPECT ST. ALTA, IA. 51002	DONATION ()	59.29
Y	ID# CK#		()	
	ID# CK#		()	
SUB-TOTAL				\$ 649.90
TOTAL (if last page of this schedule)				\$ 1349.15

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