

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	Indexed _____
Audited _____	Computer _____

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

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
(8) Support State of Candidates

CANDIDATE COMMITTEES ONLY:

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

SEP 15 2003

[Signature]
SIGNATURE OF TREASURER (or person filing this report)

712-792-3480
TELEPHONE

9-10-03
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 Final REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate one 2

CHECK IF AMENDMENT TO REPORT DATED NA

Local Committees, enter Date of Election <u>5-13-03</u>
County & Local Committees, enter County in which Election is held <u>Carroll</u>

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 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.)	\$ <u>3.23</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>323.43</u>
Schedule F: Loans Received total (Attach Schedule F)	<u>0</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	<u>0</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL.....\$	<u>326.66</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	<u>326.66</u>
Schedule F: Loan Repayments total (Attach Schedule F)	<u>0</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$ <u>0</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ <u>0</u>
IN-KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ <u>0</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ <u>0</u>
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	_____ YES <input checked="" type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ <u>0</u>

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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
8-13-03	ID# CK# 2967	David S. Bruner 225 E. 7th Carroll, IA 51401	None	\$25 ⁰⁰	
8-13-03	ID# CK# 12893	Robert S. Bruner 225 E. 7th Carroll, IA 51401		25 ⁰⁰	
8-14-03	ID# CK# 19545	IUS DS Ltd Junction 71+30 Carroll, IA 51401		25 ⁰⁰	
8-13-03	ID# CK# 5141	Alice Simons 204 Westgate Mall Carroll, IA 51401		25 ⁰⁰	
8-13-03	ID# CK# 9543	Carroll Chiropractic 503 N. Main Carroll, IA 51401		25 ⁰⁰	
8-28-03	ID# CK# 1943	Greteman Chiropractic 710 Simon Carroll, IA 51401		25 ⁰⁰	
8-28-03	ID# CK# 2310	James Knott 1503 Birch Carroll, IA 51401		25 ⁰⁰	
9-9-03	ID# CK#	Barry T. Bruner 225 E. 7th Carroll, IA 51401		54.21	
9-9-03	ID# CK# ?	Matt Greteman 1825 N. Carroll St Carroll, IA 51401		34.22	
9-9-03	ID# CK# NA	Unitemized Contributions		35 ⁰⁰	

SUB-TOTAL
 \$298.43
 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.

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 09/97)	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)
Carroll Yes

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
8-15-03	ID# CK# 116	State of Iowa 514 E. Locust DSM IA 50309	Late Report Charge	\$ 50.00
8-15-03	ID# CK# 117	KCIM / KKRL Box 886 Carroll, IA 51401	Radio Advertising Acct	53.76
8-21-03	ID# CK# 118	KCIM / KKRL Box 886 Carroll, IA 51401	Radio Advertising Acct	65.00
8-29-03	ID# CK# 119	KCIM / KKRL Box 886 Carroll, IA 51401		50.00
9-10-03	ID# CK# 120	KCIM / KKRL Box 886 Carroll, IA 51401		87.90
7-14-03	ID# CK# EFT	Carroll County State Bank 126 W. 6th Carroll, IA 51401	Bank Charges	20.00
	ID#			
	CK#			
	ID#			
	CK#			

SUB-TOTAL \$ 326.66
TOTAL (if last page of this schedule) \$ 326.66

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 56.8(3)(i).)

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