

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

OCT 15 2004

Cherokee

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>17788</u>
Indexed	_____
Audited	_____
Computer	_____

COMMITTEE NAME (Must be same as on Statement of Organization)
LEROY SCHOON FOR SUPERVISOR

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
 (8) Support Slate of Candidates

Victoria S. Wittgraf (712) 225-6481 10-14-04
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A October 19, 2004 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate one 1

CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election.
November 2, 2004
 County & Local Committees, enter County in which Election is held
Cherokee

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>0.00</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A)	1640.00	
Schedule F: Loans Received total (Attach Schedule F)	0.00	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00	
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>1640.00</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B)	1174.54	
Schedule F: Loan Repayments total (Attach Schedule F)	0.00	
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>465.46</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0.00</u>
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>0.00</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0.00</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<u>YES</u> <input checked="" type="checkbox"/> <u>NO</u>
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>386.06</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)
LEROY SCHOON FOR SUPERVISOR

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
10/13/04	ID# CK#	Joan Ballantyne P.O. Box 734 Cherokee, IA 51012		\$ 20.00	X
10/14/04	ID# CK#	Thomas D. Boothby, Jr. P.O. Box 1004 Cherokee, IA 51012		20.00	X
10/14/04	ID# CK#	Rita Comstock 1478 Northridge Dr. Cherokee, IA 51012		20.00	X
10/14/04	ID# CK#	Doris A. Meloy 333 Sioux Valley Dr., #114 Cherokee, IA 51012		20.00	X
10/14/04	ID# CK#	Ken Ogren 302 East Barnes St. Marcus, IA 51035		20.00	X
09/10/04	ID# CK#	LeRoy Schoon 1479 Harrison Dr. Cherokee, IA 51012	candidate	1000.00	
10/12/04	ID# CK#	LeRoy Schoon 1479 Harrison Dr. Cherokee, IA 51012	candidate	500.00	
10/14/04	ID# CK#	James A. Staver 508 North Roosevelt Ave. Cherokee, IA 51012		20.00	X
10/14/04	ID# CK#	Chuck Wulfsen 311 Coyote Dr. Cherokee, IA 51012		20.00	X
	ID# CK#				
SUB-TOTAL				\$1640.00	
TOTAL (if last page of this schedule)				\$1640.00	

* 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

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 (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
 LEROY SCHOON FOR SUPERVISOR

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
09/10/04	ID# CK# 1	America's Campaign Store P.O. Box 1612 Jeffersonville, IN 47131	250 yard signs	\$ 636.47
10/08/04	ID# CK# 2	U.S. Post Office 410 W. Willow St. Cherokee, IA 51012	Postage (150 - 37¢ stamps) for mailings	55.50
10/12/04	ID# CK# 3	Bomgaars 1000 N. 2nd Cherokee, IA 51012	110 posts for field signs	482.57
	ID# CK#			
SUB-TOTAL				\$ 1174.54
TOTAL (if last page of this schedule)				\$ 1174.54

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).)

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

SCHEDULE
H
(Rev. 02/96) CAMPAIGN
PROPERTY

ATTACH SCHEDULE H TO
EACH REPORT, MAKING
CHANGES AS REQUIRED.

CHECK THIS BOX IF
AMENDING FORM

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

LEROY SCHOON FOR SUPERVISOR

PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY

PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY **

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
10/12/04	110 posts for field signs	482.57	386.06

Date (MM/DD/YR)	Name and Address of Purchaser/Donor	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT
TRANSFER TO SUMMARY PAGE) \$ 386.06

** PROPERTY SALES & TRANSFERS TOTAL
(TRANSFER TO SUMMARY PAGE) \$ _____

TOTALS \$ _____ \$ _____

* If estimated, show *est.* beside figure.

(Attach Additional Schedules if Needed)

10-15-2004 11:05AM FROM SAYRE WITGRAF MELOY 712 225 5300