

DISCLOSURE SUMMARY PAGE

Reset Form

| | |
|------------------------------------|-------------------|
| FORM DR-2 (Rev. 07/2003) | DISCLOSURE REPORT |
| For Office Use Only | |
| Comm. # | 17617 |
| Logged In | |
| Scanned | |
| Computer | |
| Audited | |

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

Dave Scott for Sheriff Committee

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

CANDIDATE COMMITTEES ONLY:

Candidate Name: Dave Scott Political Party: Republican

Office Sought: Cherokee County Sheriff District (if Senate or House):

Stamp: FILED OCT 19 2004 PM 10:15:04

Meredith Scott, Treasurer
SIGNATURE OF TREASURER (or person filing this report)

712-443-8883
TELEPHONE

Oct. 15, 2004
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 October 19, 2004 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate one 1

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

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.) \$ 236.51

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1440.00

Schedule F: Loans Received total (Attach Schedule F) 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 1676.51

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 1024.27

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) \$ 652.24

****UNPAID BILLS** (From Schedule D - Attach Schedule D)..... \$ 0

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$ 191.00

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) \$ 3158.36

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

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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Dave Scott for Sheriff 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 | ✓ IF FOR FUND-RAISER INCOME |
|---------------------------------------|--|---|--|-----------------|-----------------------------|
| 9-10-04 | ID# CK# | Filmore + Darlene Gustafson 1702 Linden St. Cherokee, IA. 51012 | - | \$ 25.00 | <input type="checkbox"/> |
| 9-14-04 | ID# CK# | MA + Ramona Kennedy P.O. Box 59 Cherokee, IA. 51012 | - | 100.00 | <input type="checkbox"/> |
| 9-16-04 | ID# CK# | Stanley + Sally Oswald 4632 I Ave. Cleghorn, IA. 51014 | - | 100.00 | <input type="checkbox"/> |
| 9-17-04 | ID# CK# | Al + Mary Bofenkamp 317 Centennial Dr. Cherokee, IA. 51012 | - | 100.00 | <input type="checkbox"/> |
| 9-17-04 | ID# CK# | Paul Donaldson 769 520th St. Cleghorn, IA. 51014 | - | 500.00 | <input type="checkbox"/> |
| 9-18-04 | ID# CK# | Marthana Scott P.O. Box 13 Meriden, IA. 51037 | Mother | 100.00 | <input type="checkbox"/> |
| 9-20-04 | ID# CK# | Gary + Lynde Lundquist 5446 H Ave Cleghorn, IA. 51014 | - | 150.00 | <input type="checkbox"/> |
| 9-22-04 | ID# CK# | Thomas J. Nelson 207 North 11th St. Cherokee, IA. 51012 | - | 100.00 | <input type="checkbox"/> |
| 9-23-04 | ID# CK# | Marian D + Verdeil A Johnson 991 490th St. Cleghorn, IA 51014 | - | 100.00 | <input type="checkbox"/> |
| 10-1-04 | ID# CK# | Jim + Lorraine Thomson 106 Hwy 3 Cleghorn, IA 51014 | - | 25.00 | <input type="checkbox"/> |
| SUB-TOTAL | | | | \$1300.00 | |
| 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). 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

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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)
Dave Scott for Sheriff 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 (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
|--------------------------|--|--|--|-----------------|
| 8-25-04 | ID# CK# | Iowa Secretary of State Lucas Bldg, First Floor Des Moines, IA 50319 | Voter Records for Campaign use | \$ 18.70 |
| 9-25-04 | ID# CK# | Bongars 1000 N 2nd St. Cherokee, IA 51012 | cable ties and carton tape for signs | 16.16 |
| 9-29-04 | ID# CK# | Visa Credit Card Po Box 3838 Omaha, Ne. 68103 | Yard Signs | 658.36 |
| 10-4-04 | ID# CK# | The Aurelia Star P.O. Box 277 Aurelia, IA. 51005 | Campaign newspaper ads | 107.80 |
| 10-11-04 | ID# CK# | The Marcus News 401 Main St. Marcus, IA 51035 | Campaign newspaper ads | 128.00 |
| 10-12-04 | ID# CK# | Chronicle Times 113 S 2nd Cherokee, IA 51012 | Campaign newspaper ads | 95.25 |
| | ID# CK# | | | |
| | ID# CK# | | | |

SUB-TOTAL \$ 1024.27

TOTAL (if last page of this schedule) \$ 1024.27

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)(i).)

| | |
|--|--------------------------|
| SCHEDULE E (Rev. 06/97) | IN KIND CONTRIBUTIONS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)
Dave Scott for Sheriff Committee

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| DATE RECEIVED (MM/DD/YR) | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE * (if applicable) | DESCRIPTION OF IN KIND CONTRIBUTION | ESTIMATED FAIR MARKET VALUE | ✓ IF FOR FUND-RAISER CONTRIBUTION |
|--------------------------|--|---|--|-----------------------------|-----------------------------------|
| 8-14-04 | Meredith Scott 4724 L Ave Meriden, IA 51037 | Spouse | Candy for parade | \$ 34.00 | <input type="checkbox"/> |
| 9-21-04 | Ron + Cheryl Paulsen 527 Elm St. Granville, IA 51022 | brother-in-law sister-in-law | Postage Stamps | 22.00 | <input type="checkbox"/> |
| 9-25-04 | Randy Pritts 800 Rock Island Ave. Cherokee, IA 51012 | — | part of the purchase of campaign bumper stickers | 50.00 | <input type="checkbox"/> |
| 9-25-04 | Unitemized contributions from numerous individuals | — | part of the purchase of campaign bumper stickers | 80.00 | <input type="checkbox"/> |
| 10-1-04 | Meredith Scott 4724 L Ave. Meriden, IA 51037 | Spouse | Homemade Campaign Posters | 5.00 | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |

SUB-TOTAL \$ 191.00
 TOTAL (if last page of this schedule) \$ 191.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.

Reset Form

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Dave Scott For Sheriff Committee

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 3158.36

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 REPAID |
|----------------------|---|--|---------------|
| | | | \$ |
| | | | |
| | | | |
| | | | |

TOTAL (PART I) \$ 0

TOTAL CASH REPAYMENTS (PART II) \$ 0

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 3158.36

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