

# DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 01/98)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # <u>9037</u>	
Indexed <u>W/Tracker</u>	
Audited _____	
Computer <input checked="" type="checkbox"/>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Chickasaw County Republicans

**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

Arnold J. Boye 691 228 4936  
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

5-15-04  
 DATE SIGNED  
**DISCLOSURE BOARD**  
 MAY 18 2004

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 May 19<sup>th</sup> REPORT FOR AN/A (1) ELECTION / (2) NO 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  
Chickasaw

## 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>1592 08</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) .....		<u>1,331 00</u>
Schedule F: Loans Received total (Attach Schedule F) .....		<u>N/A</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....		<u>N/A</u>
<b>(Schedule H applies to Candidates' Committees Only)</b>		
<b>SUB-TOTAL.....</b>	<b>\$</b>	<u>2923 08</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) .....		<u>1152 59</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>1770 49</u>

UNPAID BILLS (From Schedule D - Attach Schedule D) ..... \$ None

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... \$ None

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... \$ None

**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

**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)

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
01-03-04	ID# CK#	Doris Miller 621 W Hale St. New Hampton Ia. 50659	N/A	\$ 25.00
1-03-04	ID# CK#	Bob Kramer 308 Lincoln St. New Hampton Ia. 50659	}	25.00
1-03-04	ID# CK#	Tom/Nancy Ryan 2286 170th St. New Hampton Ia. 50659		25.00
1-06-04	ID# CK#	Glen Poppe 1566 270th St. Nashua Ia. 50658		100.00
1-06-04	ID# CK#	Walt & Janet Wentland PO Box 319 Fredricksburg Ia. 50630		100.00
1-06-04	ID# CK#	Melvin Maseman 1979 110th St. New Hampton Ia. 50659		25.00
1-06-04	ID# CK#	Randy & Karen Frisch 2045 Woodland Drive New Hampton Ia. 50659		50.00
1-07-04	ID# CK#	Jim & Sue Schueh Fluer Drive New Hampton Ia. 50659		50.00
1-09-04	ID# CK#	Wendell or Ellen Liddle PO Box 3 New Hampton Ia. 50659		100.00
1-11-04	ID# CK#	Adis Lee 2655 170th St. New Hampton Ia. 50659		20.00
SUB-TOTAL 520.00				\$ 520.00
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) (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

**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)  
Chickasaw County Republican Central Com.

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
1-11-04	ID# CK#	Loren Matthe 2762 Stevens Ave Friedrichsburg Ia. 50630	N/A	\$ 50 <sup>00</sup>
1-11-04	ID# CK#	Richard Walter 2200 Kenwood Ave New Hampton Ia. 50659	}	25 <sup>00</sup>
1-17-04	ID# CK#	Alice Hans Estate PO Box 310 New Hampton Ia 50659		15 <sup>00</sup>
1-17-04	ID# CK#	Allen & Luana Borlaug 1035 Windsor Ave. Waucoma Ia. 52176		50 <sup>00</sup>
1-19-04	ID# CK#	Caucus nite Buck Bag unitemized Contributions		73 <sup>00</sup>
1-22-04	ID# CK#	Caucus nite Buck Bag unitemized Contributions		44 <sup>00</sup>
2-2-04	ID# CK#	Caucus nite Buck Bag unitemized Contributions		44 <sup>00</sup>
2-3-04	ID# CK#	Paul & Wilburta Hentges PO Box 104 Alta Vista Ia. 50603		100 <sup>00</sup>
3-8-04	ID# CK#	Jeff + Marie Scherer 517 W Wilson New Hampton Ia 50659		50 <sup>00</sup>
3-24-04	ID# CK#	Nate Schwickerath 2069 170th St. New Hampton Ia 50659	40 <sup>00</sup>	
491 SUB-TOTAL				\$ 491+50
TOTAL (if last page of this schedule)				\$

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For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (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)  
*Chickasaw Co Republican Central Com*

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
3-24-04	ID# CK#	John Kottke 2676 240th St. Fredricksburg Ia 50630	N/A	\$ 40.00	<input type="checkbox"/>
3-24-04	ID# CK#	Arnie Boge 2160 Amherst Place Tonia Ia. 50645		40.00	<input type="checkbox"/>
4-13-04	ID# CK#	Dave Vandenberg 3091 310th St. Sumner Ia. 50674		40.00	<input type="checkbox"/>
4-13-04	ID# CK#	Allen Borlaug 1035 Windsor Ave Waucoma Ia. 52171		40.00	<input type="checkbox"/>
4-20-04	ID# CK#	Lavone Snider PO Box 214 Fredricksburg Ia. 50630		40.00	<input type="checkbox"/>
4-20-04	ID# CK#	Melvin Maseman 1979 110th St. New Hampton Ia. 50659		40.00	<input type="checkbox"/>
4-20-04	ID# CK#	Jim Schueth 326 Elmer Drive New Hampton Ia 50659		40.00	<input type="checkbox"/>
5-11-04	ID# CK#	Diana Vandanginhom 2106 120th St. New Hampton		40.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL \$ 520 + 491 + 328.00

TOTAL (if last page of this schedule) \$ 1331.00

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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>B</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)

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
1-17-04	ID# CK# 650	Nashua Reporter Main St Nashua Ia. 50658	Caucus Site Publication	\$ 56 <sup>00</sup>
2-7-04	ID# CK# 651	New Hampton Papers 10 N. Chestnut New Hampton Ia 50659	Caucus Site Publication	250 <sup>02</sup>
3-9-04	ID# CK# 652	Jill Eike 215 S Walnut New Hampton Ia. 50659	Secretary Meeting Expense (Printing, Postage)	46 <sup>59</sup>
3-24-04	ID# CK# 653	RPI Des Moines, Ia.	Republican convention Delegate Fees	980 <sup>00</sup>
4-13-04	ID# CK# 654	Karen Malford 241 S water St New Hampton Ia. 50659	Candidate Contribution	100 <sup>00</sup>
4-13-04	ID# CK# 656	Arnie Boge, Ia House 2160 Amherst Pl. Ionia Ia 50645	Candidate Contribution	200 <sup>00</sup>
5-5-04	ID# CK# 656	Iowa Ethics & Disclosure Bd 514 E Locust Street Sud 104 Des Moines, Ia. 50309	Late Filing Penalty	20 <sup>00</sup>
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1152 <sup>59</sup>

**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 56.6(3)(i).)