

**FOR INSTRUCTIONS, SEE BACK OF FORM**

CHECK ONE:

- This is an **Initial\*** Statement of Organization  
 This is an **amended\*** Statement of Organization

\*An Initial Statement of Organization should be filed within 10 days of the committee's accepting contributions, making expenditures or incurring indebtedness exceeding \$750. Amendments should be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.

FORM DR-1 (Rev. 01/2003)	STATEMENT OF ORGANIZATION
For Office Use Only	
Comm. # _____	Indexed _____
Audited _____	Computer _____

**COMMITTEE NAME**  
Larry E Gibbs, Clayton County 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 (list candidates under purpose of committee)

<b>COMMITTEE TREASURER</b>	<b>COMMITTEE CHAIR</b>
Name <u>Dixie Lee Willman</u>	Name _____
Mailing Address <u>28154 Garber Rd</u>	Mailing Address _____
City, State Zip Code <u>Garber IA 52048</u>	City, State Zip Code _____
Phone ( <u>563</u> ) <u>255-2817</u>	Phone ( ) _____
e-Mail <u>dixie@alpine.com.net</u>	e-Mail _____

INDICATE PURPOSE OF COMMITTEE - Check One Box  Advocate for/against candidate(s)  Advocate for/against ballot issue(s)

Comment or description:  
 All Candidates Enter:  
 Office Sought: Clayton County Supervisor District: \_\_\_\_\_  
 Political Party (if applicable) Democrat Year Standing for Election: 2003  
 County/Local Candidates and Local Ballot/Franchise Committees Enter:  
 County: Clayton Date of Election: 7-22-03

<b>Bank Account Name</b> <u>Larry E Gibbs Clayton County Supervisor</u>	<b>Candidate name &amp; Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor</b> <u>Larry E Gibbs</u>
Name of Financial Institution/Type of Account <u>Garnavillo Savings Bank</u>	Mailing Address <u>PO Box 445</u>
Mailing Address <u>101 South Main</u>	City <u>Garnavillo</u> State <u>IA</u> Zip <u>52049</u>
City <u>Garnavillo</u> State <u>IA</u> Zip <u>52049</u>	Phone ( <u>563</u> ) <u>964-2178</u>
	e-Mail <u>N/A</u>

**DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION**  
 Indicate disposition of funds by marking appropriate number in box:

(1) DONATED TO <u>Democratic Clayton</u> COUNTY CENTRAL COMMITTEE	(6) PRORATED REFUND TO CONTRIBUTORS
(2) DONATED TO _____ LOCAL/STATE/NATL POLITICAL PARTY (underline one)	(7) TRANSFER TO ANOTHER COMMITTEE OF THIS SAME CANDIDATE (CANDIDATES ONLY)
(3) DONATED TO CHARITABLE ORGANIZATION (specify) _____	(8) RETURN TO PARENT ENTITY GENERAL FUND (PACS ONLY)
(4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND (underline one)	(9) OTHER (PACs ONLY), PLEASE BE SPECIFIC _____
(5) PARTISAN CONGRESSIONAL DISTRICT FUND	

**STATEMENT OF AFFIRMATION BY TREASURER AND CANDIDATE; OR POLITICAL COMMITTEES, BY CHAIRPERSON**  
 I am aware that I am required to file disclosure reports if the committee receives contributions, makes expenditures, or incurs indebtedness in excess of \$750.00 in a calendar year to expressly advocate for any candidate or ballot issue. I understand that although the treasurer normally prepares and files reports, the candidate or chairperson (PACs) is responsible under the law for accurate and timely disclosure reports and that late-filed reports are subject to civil penalties and possible other legal action. I understand that by filing this form, I am subject to the laws found in Iowa Code chapter 56, chapter 68B and administrative rules found in chapter 361. I affirm that all committee officers have been informed of their appointment and obligations.

Dixie Lee Willman \_\_\_\_\_  
 Signature of Treasurer Date Signed 7-16-03