*FOR INSTRUCTIONS, SEE BACK OF FORM*

# DISCLOSURE SUMMARY PAGE

| FORM DR-2 (Rev. 03/2003) | DISCLOSURE REPORT |
|---|---|

**For Office Use Only**
Comm. # _____
Logged In _____
Scanned _____
Computer _____
Audited _____

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*
Larry E Gibbs Clayton County Supervisor

**IMPORTANT:** Indicate type of committee you are reporting for: [X]

(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

**CANDIDATE COMMITTEES ONLY:**

Candidate Name: Larry E Gibbs
Political Party: Democratic
Office Sought: Clayton County Supervisor
District (if Senate or House): —

AUG - 6 2003

Dixie Lee Willman — SIGNATURE OF TREASURER (or person filing this report)
563-255-2817 — TELEPHONE
8-5-03 — 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 Dissolution REPORT FOR AN/A (1) ELECTION /(2) NON-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: 7-22-03
County & Local Committees, enter County in which Election is held: Clayton

## 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.) ..... $ 356.20

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) ..... 300.00

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 $** 656.20

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) . 656.20

Schedule F: Loan Repayments total (Attach Schedule F) ..... 0

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... $ 0

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

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... $ 0

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... $ 0

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?) ___ YES X NO

**For Instructions, See Back of Form**

| SCHEDULE **A** (Rev. 06/97) | MONETARY RECEIPTS |
|---|---|
| ☐ 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)*
Larry E Gibbs Clayton County 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 |
|---|---|---|---|---|---|
| 7/18/03 | ID#<br>CK# | Larry E Gibbs<br>Carnavillo IA 52049 | Self | $300.00 | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | | | SUB-TOTAL | $300.00 | |
| | | | **TOTAL** ***(If last page of this schedule)*** | $300.00 | |

* 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*

| SCHEDULE **B** (Rev. 09/97) | MONETARY EXPENDITURES |
|---|---|
| ☐ CHECK THIS BOX IF AMENDING 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.

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

Larry E Gibbs Clayton County 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 |
|---|---|---|---|---|
| 7/17/03 | ID#<br>CK# | KCTN<br>Elkader IA 52043 | Radio Advertising | $324.00 |
| 7/18/03 | ID#<br>CK# | Cedar Street Design & Printing (Clayton Co Register)<br>Elkader IA 52043 | Newspaper Advertising | 313.34 |
| 8/5/03 | ID#<br>CK# | Clayton Co. Democrats<br>Elkader IA 52043 | Donation | 18.86 |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | | | SUB-TOTAL | $ 656.20 |
| | | | **TOTAL** ***(If last page of this schedule)*** | $ 656.20 |

**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)(l).)

# Notice of Dissolution

FORM (Rev 07/02)

**DR-3**
**NOTICE OF DISSOLUTION**

**For Office Use Only**

Comm. # _____
Indexed _____
Audited _____
Computer _____
Certified Date of Dissolution _____

AUG - 6 2003

**COMMITTEE NAME**

Larry E Gibbs Clayton County Supervisor
Official Name of Committee

605 Washington
Street

Garnavillo IA 52049
City, State, Zip Code

(563) 964-2178
Area Code Telephone

**WHEN TO FILE:**

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Dixie Lee Willman
Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

8-5-03
Date Signed

**FOR INSTRUCTIONS, SEE BACK OF FORM**
**This form is not applicable to statutory political committees.**