FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 05/2002)	DISCLOSURE REPORT

For Office Use Only
Comm. # 17119
Indexed SW
Audited
Computer 25

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Shirley Goyette For Recorder

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 State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name: Shirley Goyette
Political Party: Republican
Office Sought: County Recorder
District (if Senate or House):

RECEIVED
DEC 31 2002
CLAY COUNTY AUDITOR
SPENCER, IOWA

x Brandy Goyette — **SIGNATURE OF TREASURER (or person filing this report)**
(712)580-8943 — **TELEPHONE**
12/31/02 — **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 Jan. 19 (report date) REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR. 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

County & Local Committees, enter County in which Election is held

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.) ..... $ 509.06

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) ..... 1600.—

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

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

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....$ 2109.06

ID

B) (**also see debts and loans below)... 2109.06

dule F) .....

report, balance must

.....$ -0-

.....$

:hedule E) .....$

:dule F).....$

☐ YES ☐ NO

Attach Schedule H) $

Attn: Sue Brown
Fax: 515-281-3701
Iowa Ethics & Campaign Disclosure Board

From: Audrey Coffman
712-262-1569
Fax - 712-262-5793

For Instructions, See Back of Form

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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)*
Shirley Goyette, For Recorder

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
11-2-02	ID# cash CK#	Wyman Steffen 1414 Cliff Lane Spencer IA 51301	—	$ 50.—	☐
10-19-02	ID# CK# 1057	Shirley Goyette 1009 W 4th St Spencer IA 51301		1550.—	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
			SUB-TOTAL	$ 1600.—	
			TOTAL ***(if last page of this schedule)***	$ 1600.—	

* 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.

12/31/2002 TUE 15:51 FAX 002/006

FOR INSTRUCTIONS, SEE BACK OF FORM

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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)*
Shirley Goyette For Recorder

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
10-19-02	ID# CK# 1005	U.S. Post Office 11 E 18th St Spencer IA 51301	Stamps for postcards	$1150.—
10-21-02	ID# CK# 1006	U.S. Post Office 11 E. 18th St Spencer IA 51301	Stamps for postcards	230.—
10-23-02	ID# CK# 1007	Daily Reporter 310 E Milwaukee St Spencer IA 51301	Newspaper Ad	75.—
10-28-02	ID# CK# 1008	Daily Reporter 310 E. Milwaukee Spencer IA 51301	Newspaper Ad	353.85
10-28-02	ID# CK# 1009	Peterson Patriot Box 126 Peterson IA 51047	Newspaper Ad	31.50
11-4-02	ID# CK# 1010	Everly-Royal News Box 77 Everly IA 51338	Newspaper Ad	32.50
12-10-02	ID# CK# 1011	State of IA 514 E Locust St Des Moines 50309	Civil penalty assessment	20.—
12-26-02	ID# CK# 1012	Shirley Goyette 1009 W 4th St Spencer IA 51301	Reimbursement close out account	216.21
			SUB-TOTAL	$2109.06
			TOTAL ***(If last page of this schedule)***	$2109.06

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).)

(for Schedule B)

12/31/2002 TUE 15:51 FAX 003/008

Clay 476

Notice of Dissolution

Reset Form

DEC 31 2002

FORM (Rev. 07/02)

DR-3
NOTICE OF DISSOLUTION

For Office Use Only

Comm. # 17119
Indexed SW
Audited
Computer
Certified Date of Dissolution

COMMITTEE NAME

Shirley Goyette For Recorder
Official Name of Committee

1009 W 4th St
Street

Spencer IA 51301
City, State, Zip Code

712 262-2442
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.

X Brandy Goyette Shirley Goyette
Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

X 12/31/02 12-31-02
Date Signed

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