FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT

For Office Use Only
Comm. # _____
Indexed _____
Audited _____
Computer _____

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Citizens for Mallicoat 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 (7)County/City Central Committee
(8)Support Slate of Candidates

Carolyn K Tallett 563-243-1193

SIGNATURE OF TREASURER (or person filing this report) **TELEPHONE** **DATE SIGNED**

Routine Penalties Due For Late Filed Reports Range from $20

ETHICS & CAMPAIGN DISCLOSURE BOARD
DEC 22 2003
FILED

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A Final 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
Nov. 4th, 2003
County & Local Committees, enter County in which Election is held
Clinton

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.) ..... $ 25.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) ..... — 0 —

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 ..... $ 25.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 25.00

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) ..... $ — 0 —

UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $ _____

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

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $ _____

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

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)*
Citizens for Mallicoat 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
12/4/03	ID# CK#	Clinton YWCA Women's Resource Center 317-7th Ave. So. Clinton, Ia 52732	Donation of remaining $25.00 to dissolve Committee.	$25.00
	ID# CK#	(1st Gateway Credit Union Cashiers Check) 063124		
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$
			TOTAL ***(if last page of this schedule)***	$ 25.00

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

Notice of Dissolution

FORM	(Rev. 02/96)
DR-3 NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	
Indexed	
Audited	
Computer	
Certified Date of Dissolution	

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
DEC 22 2003
FILED

COMMITTEE NAME

Official Name of Committee

Citizens for Mallicoat

Street

1205 Woodlawn

City, State, Zip Code

Clinton, Ia 52732

Area Code Telephone

(563 242-2962

Effective date of dissolution:

December 16, ~~19~~ 2003

Carolyn K. Tallett

Signature of Treasurer

12-16-03

Date Signed

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:
I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

Ronald J. Mallicoat — 12-16-03

Signature of Candidate - Required for Candidate's Committee — Date signed

WHEN TO FILE:
The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.