

*Clinton*

**DISCLOSURE SUMMARY PAGE**

<b>FORM DR-2</b> (Rev. 01/98)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	<u>25052</u>
Indexed	<u>SM</u>
Audited	
Computer	<u>SM</u>

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
CITIZENS FOR EXCELLENCE IN GOVERNMENT

**IMPORTANT:** Indicate type of committee you are reporting for:

( 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

William C. Rathje Treas (563) 242 4647  
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

2-18-05  
 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 2-18-05 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.  
 (report date) MAR 03 2005 Indicate one  2

CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

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

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.)

**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.) .....\$ 520.38

**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.....\$** 520.38

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ..... 520.38

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) .....\$ - 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 \_\_\_\_\_ NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \$ \_\_\_\_\_

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**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 EXCELLENCE IN GOVERNMENT*

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
2-11-05	ID# CK# 1017	SALVATION ARMY. 219 1st AVE. CLINTON, IOWA 52732	DONATION	\$520.38
	ID# CK#			
SUB-TOTAL				\$ 520.38
TOTAL (if last page of this schedule)				\$ 520.38

**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).)

Clinton

# Notice of Dissolution

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

### COMMITTEE NAME

MAR 03 2005

Official Name of Committee	
CITIZENS FOR EXCELLENCE IN GOVERNMENT	
Street	
C/O WILLIAM C. RATHJE	
1639 8th AVE. S.	
City, State, Zip Code	
CLINTON, IOWA 52732-5324	
Area Code	Telephone
(563)	242 4647

Effective date of dissolution:

FEBRUARY 18, 2005

*William C Rathje*  
Signature of Treasurer

2-18-05  
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 Iowa Code section 56.42 and rule 351 IAC 4.42.

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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. The final bank statement may be sent in later if it is not available at the time the Notice of Dissolution is filed.

### FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

FORM (Rev. 02/02)

**DR-3  
NOTICE OF  
DISSOLUTION**

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**For Office Use Only**

Comm. # 25052

Indexed SM

Audited \_\_\_\_\_

Computer SM

Certified Date of Dissolution \_\_\_\_\_