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

NOV 29 2004

Crawford

FORM DR-1 (REV. 07/2004)	STATEMENT OF ORGANIZATION

For Office Use Only
Comm. # 17837
Indexed DM
Audited
Computer DM

COMMITTEE NAME ↓↓

Lawler for Supervisor

IMPORTANT: Indicate type of committee you are reporting for: 5

(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)Statewide PAC (3)State Party (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political Subdivision PAC (11) Local Ballot Issue

COMMITTEE TREASURER (mandatory for all committees)

Name ↓↓ Sharil K. Lawler

Mailing Address ↓↓ PO Box 97 - 609 Somerset

City, State ↓↓ Zip Code ↓↓ Vail IA 51465

Phone (712) 677-2274

e-Mail

COMMITTEE CHAIR (mandatory except for a candidate's committee)

Name ↓↓

Mailing Address ↓↓

City, State ↓↓ Zip Code ↓↓

Phone ( )

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: Board of Supervisor

District:

Political Party (if applicable) Democrat

Year Standing for Election: 2004

County/Local Candidates and Local Ballot/Franchise Committees Enter:

County: Crawford

Date of Election: 11-2-04

Bank Account Name ↓↓

Lawler for Supervisor

Name of Financial Institution/type of Account ↓↓

Wells Fargo Bank

Mailing Address ↓↓

City ↓↓ State ↓↓ Zip ↓↓

Denison IA 51442

Candidate name & Address or **Parent Entity** (PACs, if applicable), **Affiliate, or Sponsor** ↓↓

John P Lawler

Mailing Address ↓↓

PO Box 97 - 609 Somerset

City ↓↓ State ↓↓ Zip ↓↓

Vail IA 51465

Phone (712) 677-2274

e-Mail

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

1. The committee and all persons connected with the committee understand that they are subject to the laws in Iowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the Iowa Administrative Code.

2. That Iowa Code section 68A.402 and rule 351—4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.

3. That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule. A committee filing this statement for purposes of using the shorter "paid for by" and who have not crossed the $750 shall notify the Board that the $750 threshold will not be crossed.

4. That Iowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.

5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.301 through 68A.303 and rule 351—4.25.

6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed.

Sharil K. Lawler — Signature of Treasurer — Date Signed: 11-23-04

John P. Lawler — Signature of Candidate, OR for all other committees, Chairperson — Date Signed: 11-23-04