

FOR INSTRUCTIONS, SEE BACK OF FORM

### DISCLOSURE SUMMARY PAGE

Reset Form

|                                    |                          |
|------------------------------------|--------------------------|
| <b>FORM DR-2</b><br>(Rev. 07/2003) | <b>DISCLOSURE REPORT</b> |
| <b>For Office Use Only</b>         |                          |
| Comm. #                            | 17689                    |
| Logged In                          |                          |
| Scanned                            |                          |
| Computer                           |                          |
| Audited                            |                          |

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

Orton For Auditor

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

**CANDIDATE COMMITTEES ONLY:**

Candidate Name Elizabeth Orton Political Party Republican

Office Sought Crawford County Auditor District (if Senate or House)

Elizabeth Orton  
SIGNATURE OF TREASURER (or person filing this report)

712-263-3398  
TELEPHONE

10/18/04  
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 October 19<sup>th</sup> 2004 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<br><u>November 2 2004</u>                   |
| County & Local Committees, enter County in which Election is held<br><u>Crawford</u> |

### 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.)

\$ 0

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

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

1129.37

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

838.89

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

- 0 -

**(Schedule H applies to Candidates' Committees Only)**

SUB-TOTAL .....

1968.26

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

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

1878.89

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) .....

89.37

\*\*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) .....

838.89

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES  NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0

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|   |                      |
|---|----------------------|
| SCHEDULE<br><b>A</b><br>(Rev. 07/03)                        | MONETARY<br>RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF<br>AMENDING FORM |                      |

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)  
Orton for Auditor

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         |
|---------------------------------------|--|---|--|-----------------|-------------------------------------|
| 7/15/04                               | ID#<br>CK#   | Elizabeth Orton<br>2313 6 <sup>th</sup> Ave N<br>Denison, IA 51442    | candidate                                  | \$ 164.37       | <input type="checkbox"/>            |
| 8/16/04                               | ID#<br>CK#   | Clarence Hoffman<br>869 S 5 <sup>th</sup> St<br>Charter Oak, IA 51439 |  | 50.00           | <input type="checkbox"/>            |
| 9/2/04                                | ID#<br>CK#   | William Porcilius<br>Box 278<br>Denison, IA 51442                     |  | 200.00          | <input checked="" type="checkbox"/> |
| 9/2/04                                | ID#<br>CK#   | Charles W. Dreibeis<br>2519 Donna Reed Rd<br>Denison, IA 51442        |  | 50.00           | <input checked="" type="checkbox"/> |
| 9/3/04                                | ID#<br>CK#   | Kenny Buck<br>2550 Donna Reed Rd<br>Denison, IA 51442                 |  | 100.00          | <input checked="" type="checkbox"/> |
| 9/3/04                                | ID#<br>CK#   | Kim Seaton<br>Box 67<br>Denison, IA 51442                             |  | 25.00           | <input checked="" type="checkbox"/> |
| 9/3/04                                | ID#<br>CK#   | Joe Smith<br>2074 W Ave<br>Dow City, IA 51528                         |  | 50.00           | <input checked="" type="checkbox"/> |
| 9/8/04                                | ID#<br>CK#   | Candice Martens<br>1741 Fawn Rd<br>Deloit, IA 51441                   |  | 100.00          | <input checked="" type="checkbox"/> |
| 9/8/04                                | ID#<br>CK#   | Duane Peppi<br>2612 Q Ave<br>Denison, IA 51442                        |  | 25.00           | <input checked="" type="checkbox"/> |
| 9/13/04                               | ID#<br>CK#   | Broadway Dental / Doug Soeman<br>1415 Broadway<br>Denison, IA 51442   |  | 50.00           | <input checked="" type="checkbox"/> |
| SUB-TOTAL                             |  |   |  | \$ 814.37       |                                     |
| TOTAL (if last page of this schedule) |  |   |  | \$              |                                     |

\* 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). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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|   |                      |
|---|----------------------|
| SCHEDULE<br><b>A</b><br>(Rev. 07/03)                        | MONETARY<br>RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF<br>AMENDING FORM |                      |

**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)  
Orton for Auditor

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         |
|--------------------------|--|---|--|-----------------|-------------------------------------|
| 9/13/04                  | ID#<br>CK#   | Sue Gallentine<br>1109 N 10 <sup>th</sup> St<br>Denison, IA 51442 |  | \$<br>25.00     | <input checked="" type="checkbox"/> |
| 9/16/04                  | ID#<br>CK#   | "Unitemized Contributions"  |  | 95.00           | <input checked="" type="checkbox"/> |
| 9/16/04                  | ID#<br>CK#   | Diane Hagens<br>2334 1st Ave S<br>Denison, IA 51442               |  | 25.00           | <input checked="" type="checkbox"/> |
| 9/20/04                  | ID#<br>CK#   | Carol Lacey<br>35866 Hanson mesa Rd<br>Hotchkiss, Co 8419         | mother                                     | 50.00           | <input checked="" type="checkbox"/> |
| 9/29/04                  | ID#<br>CK#   | "Unitemized Contributions"  |  | 20.00           | <input checked="" type="checkbox"/> |
| 9/30/04                  | ID#<br>CK#   | Vetter Equipment<br>705 Hwy 39 North<br>Denison, IA 51442         |  | 100.00          | <input checked="" type="checkbox"/> |
|                          | ID#<br>CK#   |   |  |                 | <input type="checkbox"/>            |
|                          | ID#<br>CK#   |   |  |                 | <input type="checkbox"/>            |
|                          | ID#<br>CK#   |   |  |                 | <input type="checkbox"/>            |
|                          | ID#<br>CK#   |   |  |                 | <input type="checkbox"/>            |

SUB-TOTAL

\$ 315.00

TOTAL (if last page of this schedule)

\$ 1129.37

\* 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). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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**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.

|  |                              |
|--|------------------------------|
| <b>SCHEDULE</b><br><b>B</b><br>(Rev. 07/03)              | <b>MONETARY EXPENDITURES</b> |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM |                              |

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

Orton for Auditor

| 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 |
|---------------------------------------|--|--|-----------------------------------|-----------------|
| 7/16/04                               | ID#<br>CK# 506   | The Office Stop<br>18 N main<br>Denison, IA 51442            | Business Cards                    | \$ 27.80        |
| 7/20/04                               | ID#<br>CK# 509   | Walmart<br>404 Arrowhead Dr<br>Denison IA 51442              | Business Cards                    | 24.47           |
| 8/19/04                               | ID#<br>CK# 510   | The Office Stop<br>18 N main<br>Denison, IA 51442            | Business Cards                    | 13.90           |
| 8/25/04                               | ID#<br>CK# 511   | The Office Stop<br>18 N main<br>Denison, IA 51442            | Card stock and envelopes          | 21.92           |
| 8/30/04                               | ID#<br>CK# 513   | Postmaster<br>102 N main<br>Denison, IA 51442                | Stamps for letters                | 37.00           |
| 9/2/04                                | ID#<br>CK# 512   | The Office Stop<br>18 N main<br>Denison, IA 51442            | Business Cards                    | 13.90           |
| 9/2/04                                | ID#<br>CK# 514   | Providian<br>P.O Box 660433<br>Dallas, Tx 75266              | Orton for Auditor<br>Signs        | 638.89          |
| 9/10/07                               | ID#<br>CK# 515   | The Office Stop<br>18 N main<br>Denison, IA 51442            | Printing<br>Business + Palm Cards | 162.16          |
| SUB-TOTAL                             |  |  |                                   | \$ 940.04       |
| TOTAL (if last page of this schedule) |  |  |                                   | \$              |

**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 68A.402(3)(i).)

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

|  |                          |
|--|--------------------------|
| <b>SCHEDULE</b><br><b>B</b><br>(Rev. 07/03)              | MONETARY<br>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)  
Orton for Auditor

| 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 |
|---------------------------------------|--|--|--------------------------------|-----------------|
| 10/4/04                               | ID#<br>CK# 516   | Manilla Times<br>459 main st<br>Manilla, IA 51454            | Newspaper ad                   | \$ 63.00        |
| 10/4/04                               | ID#<br>CK# 517   | KDS10<br>1530 Ridge Rd<br>Denison, IA 51442                  | Radio ad                       | 198.00          |
| 10/6/04                               | ID#<br>CK# 518   | Mapleton Press<br>504 main<br>Mapleton, IA 51034             | Newspaper ad                   | 120.60          |
| 10/6/04                               | ID#<br>CK# 519   | channel 18<br>2712 K Ave<br>Denison, IA 51442                | TV ad                          | 105.00          |
| 10/7/04                               | ID#<br>CK# 520   | Denison Bulletin<br>1410 Broadway<br>Denison, IA 51442       | Newspaper ad                   | 452.25          |
|                                       | ID#<br>CK#   |  |                                |                 |
|                                       | ID#<br>CK#   |  |                                |                 |
|                                       | ID#<br>CK#   |  |                                |                 |
| SUB-TOTAL                             |  |  |                                | \$ 938.85       |
| TOTAL (if last page of this schedule) |  |  |                                | \$ 1878.89      |

**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 68A.402(3)(i).)

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|   |                               |
|---|-------------------------------|
| SCHEDULE<br><b>F</b><br>(Rev. 07/03)                        | LOANS<br>RECEIVED<br>& REPAID |
| <input type="checkbox"/> CHECK THIS BOX IF<br>AMENDING FORM |                               |

COMMITTEE NAME (Must be same as on Statement of Organization)  
Orton for Auditor

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

| DATE RECEIVED (MM/DD/YR) | NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) | RELATIONSHIP TO CANDIDATE (If Applicable) | AMOUNT OF LOAN |
|--------------------------|---|---|----------------|
| 8/17/04                  | Elizabeth Orton<br>2313 6 <sup>th</sup> Ave N<br>Denison, IA 51442  | Candidate                                 | \$ 638.89      |
| 10/7/04                  | Elizabeth Orton<br>2313 6 <sup>th</sup> Ave N<br>Denison, IA 51442  | Candidate                                 | 200.00         |
|                          |   |   |                |
|                          |   |   |                |

TOTAL (PART I) \$ 838.89

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

| DATE PAID (MM/DD/YR) | NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) | RELATIONSHIP TO CANDIDATE (If Applicable) | AMOUNT REPAID |
|----------------------|---|---|---------------|
|                      |   |   | \$            |
|                      |   |   |               |
|                      |   |   |               |
|                      |   |   |               |

TOTAL CASH REPAYMENTS (PART II) \$ \_\_\_\_\_

From Schedule E -- TOTAL LOANS FORGIVEN \$ \_\_\_\_\_

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 838.89

\*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). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

p.7  
712-263-8606  
Orton  
Oct 18 04 11:56a