

*Ballard*

**FOR INSTRUCTIONS, SEE BACK OF FORM**

OCT 11 2001

<b>FORM DR-1</b> (Rev. 07/00)	<b>STATEMENT OF ORGANIZATION</b>
<b>For Office Use Only</b>	
Comm. #	<u>13066-A</u>
Indexed	
Audited	
Computer	

**CHECK ONE:**

- This is an **initial\*** Statement of Organization
- This is an **amended\*** Statement of Organization

\*An initial Statement of Organization should be filled within 10 days of the committee's accepting contributions, making expenditures or incurring indebtedness exceeding \$500. Amendments should be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.

**COMMITTEE NAME (Required by law)**  
Committee to Elect Mark Leslie

**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 (list candidates under purpose of committee)

**COMMITTEE TREASURER** (Required by law) *This address used for all reminders and correspondence*      **COMMITTEE CHAIR** (List additional officers on separate page)

<b>Name</b> <u>Sara Bitis</u>	<b>Name</b> <u>Traci Leslie</u>
<b>Mailing Address</b> <u>6004 Winona Ave</u> City, State Zip Code <u>Des Moines IA 50312</u>	<b>Mailing Address</b> <u>1840 Hawthorne Dr.</u> City, State Zip Code <u>Waukee IA 50263</u>
<b>Phone</b> <u>(515) 277-2001</u>	<b>Phone</b> <u>(515) 987-8925</u>
<b>e-Mail</b> <u>isadam13@home.com</u>	<b>e-Mail</b> <u>mtdeleslie@aol.com</u>

**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: Mayor District: Waukee  
Political Party (if applicable) N/A Year Standing for Election: 2001  
**County/Local Candidates and Local Ballot/Franchise Committees Enter:**  
County: Dallas Date of Election: 11/6/01

<b>Bank Account Name</b> ↓ ↓ <u>Committee to Elect Mark Leslie</u> Name of Financial Institution/type of Account ↓ ↓ <u>Waukee St. Bank / Basic Checking</u> Mailing Address ↓ ↓ <u>Po Box 66</u> City ↓ ↓ State ↓ ↓ Zip ↓ ↓ <u>Waukee IA 50263</u>	<b>Candidate name &amp; Address</b> or <b>Parent Entity (PACs, if applicable), Affiliate, or Sponsor</b> ↓ ↓ <u>Mark Leslie</u> Mailing Address ↓ ↓ <u>1840 Hawthorne Dr.</u> City ↓ ↓ State ↓ ↓ Zip ↓ ↓ <u>Waukee IA 50263</u> Phone <u>(515) 987-8925</u> e-Mail <u>mtdeleslie@aol.com</u>
--	--

**DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION**  
Indicate disposition of funds by marking appropriate number in box:  (6)

(1) DONATED TO _____ COUNTY CENTRAL COMMITTEE	(6) PRORATED REFUND TO CONTRIBUTORS
(2) DONATED TO _____ LOCAL/STATE/NAT'L POLITICAL PARTY (underline one)	(7) TRANSFER TO ANOTHER COMMITTEE OF THIS SAME CANDIDATE (CANDIDATES ONLY)
(3) DONATED TO CHARITABLE ORGANIZATION (specify) _____	(8) RETURN TO PARENT ENTITY GENERAL FUND (PACS ONLY)
(4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND (underline one)	(9) OTHER (PACS ONLY), PLEASE BE SPECIFIC _____
(5) PARTISAN CONGRESSIONAL DISTRICT FUND	

**STATEMENT OF AFFIRMATION BY TREASURER AND CANDIDATE; OR POLITICAL COMMITTEES, BY CHAIRPERSON**

I am aware that I am required to file disclosure reports if the committee receives contributions, makes expenditures, or incurs indebtedness in excess of \$500.00 in a calendar year to expressly advocate for any candidate or ballot issue. I understand that although the treasurer normally prepares and files reports, the candidate or chairperson (PACs) is responsible under the law for accurate and timely disclosure reports and that late-filed reports are subject to civil penalties and possible other legal action. I understand that by filing this form, I am subject to the laws found in Iowa Code chapter 56, chapter 68B and administrative rules found in chapter 351. I affirm that all committee officers have been informed of their appointment and obligations.

*Sara E. Bitis*  
Signature of Treasurer

*Mark Leslie*  
Signature of Candidate, OR, if PAC, Central Committee or Local Ballot Issue, Chairperson

10/2/01 Date Signed

10/2/01 Date Signed