

Dallas

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens to Elect Alice Wicker

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 State of Candidates

(Rev. 05/2002) REPORT

For Office Use Only
 Comm. # 17140
 Indexed _____
 Audited _____
 Computer _____

CANDIDATE COMMITTEES ONLY:

Candidate Name Alice Wicker OCT 25 2004 Political Party Democrat
 Office Sought Dallas Co Supervisor District (if Senate or House) _____

OCT 25 2004

DATE SIGNED

Jackie Schram 515 986-3383
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

AM FILING A 10-19-04 REPORT FOR AN/A (1) ELECTION/(2) NON-ELECTION YEAR.
 (report date) Indicate one

[CHECK IF AMENDMENT TO REPORT DATED _____]

Local Committees, enter Date of Election
11-2-04
 County & Local Committees, enter County in which Election is held
DALLAS

[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.)\$ 10,054.17

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 4235 -

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.....\$ 14,289.17

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)... 4847.92

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)\$ 9441.25

*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

Reset Form

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens to Elect Albee Walker

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
7/24/04	ID# CK#	Karen Smith 2733 n ave Adel, Ia 50003		\$ 200-	<input type="checkbox"/>
	ID# CK#	Mark Harding 3211 Kinross Place Des Moines, Ia 50312		100-	<input type="checkbox"/>
	ID# CK#	Alice Knapp 5000 Westtown PKY #100 WDM 50266		500-	<input type="checkbox"/>
	ID# CK#	Ave Erickson 3059 191st #235 Granger 50109		100-	<input type="checkbox"/>
	ID# CK#	Jerry Reigent 2410 Park Ave Des Moines 50321		100-	<input type="checkbox"/>
	ID# CK#	Wm Knapp 5221 1010th Pl Johnston Ia 50131		100-	<input type="checkbox"/>
	ID# CK#	Wm C Knapp 5000 Westtown PKY #100 West Des Moines 50266		1,000	<input type="checkbox"/>
	ID# CK#	Ray Rissley PO 219 Dallas Center 50063		100-	<input type="checkbox"/>
	ID# CK#	Steve Crowe 4525 Raccoon Ridge D. Columbia, Mo 65201		50-	<input type="checkbox"/>
	ID# CK#	Nancy Nichols 6200 EP TRUE #505 WDM 50266		50-	<input type="checkbox"/>
SUB-TOTAL				\$2300-	
TOTAL (if last page of this schedule)				\$4235	

* 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.

For Instructions, See Back of Form



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

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

COMMITTEE NAME (Must be same as on Statement of Organization),
Citizens to Elect Alice Walker

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.

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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
	ID# CK#	<i>Allen Feldman 2909 Galust Stranger 50109</i>		\$ 50 -	<input type="checkbox"/>
	ID# CK#	<i>Betty Feldman 2309 Galust Stranger 50109</i>		50 -	<input type="checkbox"/>
	ID# CK#	<i>Carol Neal 2798 Sportoman Club Pl Adel Iowa 50003</i>		100 -	<input type="checkbox"/>
	ID# CK#	<i>Rosemary Callen 3207 160th Woodward, IA 50276</i>		10 -	<input type="checkbox"/>
	ID# CK#	<i>Barb Presti 2103 W St Stranger Iowa 50109</i>		100 -	<input type="checkbox"/>
	ID# CK#	<i>Pat Shaffer 4815 Waterberry Rd Des Moines, Ia 50312</i>		125	<input type="checkbox"/>
	ID# CK#	<i>Doug Reese 4815 Waterberry Rd Des Moines, Ia 50312</i>		125 -	<input type="checkbox"/>
	ID# CK#	<i>Dallas Co Democrats Martha Lane 1016 Drive Adel Iowa 50003</i>		300 -	<input type="checkbox"/>
	ID# CK#	<i>Jeff Walker 23304 W 45th Shawnee, KS 66226</i>	SON	50 -	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 910 -	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens to Elect Albee Wecker

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
	ID# CK#	<i>Central Ia Bldg/Trade Des Moines 50309</i>		\$ 200-	<input type="checkbox"/>
	ID# CK#	<i>Political Action Com, Tom Kelleher Box 7310 Des Moines, Iowa</i>			<input type="checkbox"/>
	ID# CK#	<i>Bill Krause 6400 Westown Pkwy West Des Moines 50266</i>		500-	<input type="checkbox"/>
	ID# CK#	<i>Helen Dwey 1805 4th Perry Ia 50220</i>		25-	<input type="checkbox"/>
	ID# CK#	<i>Bill Seglin Box 440 Woodburn Ia</i>		100-	<input type="checkbox"/>
	ID# CK#	<i>US Steel Workers 125 NW Broadway Des Moines 50313</i>		200-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1025	
TOTAL (if last page of this schedule)				\$	

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FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> 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 to Elect Alice Weiker

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
9/9/04	ID# CK#	<i>Carter Printing 1739 E Grand Des Moines, IA 50316</i>	<i>yard signs campaign cards</i>	<i>\$906.30</i>
8/10/04	ID# CK# 1017	<i>Carter Printing 1739 E Grand Des Moines, IA 50316</i>	<i>envelopes return & return</i>	<i>146.28</i>
8/26/04	ID# CK# 1021	<i>Carter Printing 1739 E Grand Des Moines, IA 50316</i>	<i>#10 envelopes #81216 Inv.</i>	<i>273.48</i>
7/18/04	ID# CK#	<i>Broken Arrow 4133 Merle May Rd Des Moines, IA 50310</i>	<i>T-shirts (2) T-shirts (22)</i>	<i>42.82 192.86</i>
8/30/04	ID# CK#	<i>Frank Steenback 11731 NW 121st Granger, IA 50100</i>	<i>yard signs paint fuel for parade cars</i>	<i>210.21</i>
9/3/04	ID# CK#	<i>R & R Realty Grp PO 31006 Des Moines, IA 50331</i>	<i>signs for 9/4/04 - 11/4/04</i>	<i>100-</i>
9/27/04	ID# CK#	<i>Adel Post office Adel Iowa</i>	<i>postage</i>	<i>1472.37</i>
9/27/04	ID# CK#	<i>Carter Printing 1739 E Grand Des Moines, IA 50316</i>	<i>brochures & letters</i>	<i>1098.16</i>
SUB-TOTAL				<i>\$4442.48</i>
TOTAL (if last page of this schedule)				<i>\$</i>

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

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> 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 to Elect Alice Walker

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
	ID# CK#	<i>Office Max 2900 University Ave West Des Moines 50266</i>	<i>Office supplies</i> ✓ #1019	<i>84.77 61.47 66.75</i>
<i>8/28/04</i>	ID# CK#	<i>Sams Club Des Moines Ia</i>	<i>candy for parades</i>	<i>54.60 34.84 51.58</i>
	ID# CK#		✓ #1016	<i>85.64 68.73</i>
<i>8/18/04</i>	ID# CK# 1018	<i>Pam Finestead Granger, Iowa 50109</i>	<i>food</i>	<i>20-</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 405.44</i>
TOTAL (if last page of this schedule)				<i>\$ 4847.92</i>

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 detailed 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)(j).)