FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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FORM **DR-2** (Rev. 07/2003) — Des Moines DISCLOSURE REPORT

For Office Use Only
Comm. # 17629
Logged In
Scanned
Computer
Audited

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

Committee to Elect Max Lawson

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: Max Lawson
Political Party: Democrat
Office Sought: Board of Supervisors
District (if Senate or House):

Max Lawson — **SIGNATURE OF TREASURER (or person filing this report)**
319/753-0049 — **TELEPHONE**
7-3-04 — **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 7-19-04 (report date) REPORT FOR AN/A (1) **ELECTION** /(2)**NON-ELECTION** YEAR. 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

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

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.) ..... $ 282.32

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 925.00

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

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... -0-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... $ 1,207.32

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 903.25

Schedule F: Loan Repayments total (Attach Schedule F) 307.07

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) ..... $ 495.39

****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) $ -0-

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SCHEDULE **A** (Rev. 07/03) MONETARY RECEIPTS

☐ 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)*

COMMITTEE TO ELECT MAX LAWSON

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
5-15-04	ID# CK# 002938	AFSCME/IOWA COUNCIL 61 PEOPLE 4320 N.W. 2ND AVE. DES MOINES, IA 50313		$ 250.00	☐
5-15-04	ID# CK# 09847	ROBERT & REBECCA A. SMITH P.O. BOX 1084 BURLINGTON, IA 52601		250.00	✓
5-15-04	ID# CK# 4311	ELLIOTT OR PATRICIA ANDERSON 119 S. ADAMS BURLINGTON, IA 52601		50.00	✓
5-15-04	ID# CK# CASH	LENNY LAWSON 1323 - 308TH AVE. WEVER, IA 52658	SON	45.00	✓
5-15-04	ID# CK# CASH	UNITEMIZED CONTRIBUTIONS		245.00	✓
5-26-04	ID# CK# CASH	HARVEY JOHNSON 413 HEDGE BURLINGTON, IA 52601		50.00	☐
5-29-04	ID# CK#	UNITEMIZED CONTRIBUTION		15.00	☐
6-9-04	ID# CK#	UNITEMIZED CONTRIBUTION		20.00	☐
	ID# CK#				☐
	ID# CK#				☐

SUB-TOTAL $ 925.00

TOTAL ***(if last page of this schedule)*** $ 925.00

* 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 B (Rev. 07/03)	MONETARY EXPENDITURES

☐ 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)*

COMMITTEE TO ELECT MAX LAWSON

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
5-17-04	ID# CK# 507	BURLINGTON HAWKEYE 800 S. MAIN BURLINGTON, IA 52601	NEWSPAPER AD	$150.00
5-17-04	ID# CK# 508	MEDIAPOLIS NEWS 616 MAIN ST. MEDIAPOLIS, IA 52637	NEWSPAPER AD	48.40
5-25-04	ID# CK# 509	BURLINGTON HAWKEYE 800 S. MAIN BURLINGTON, IA 52601	NEWSPAPER AD	212.50
6-1-04	ID# CK# 510	BURLINGTON HAWKEYE 800 S. MAIN BURLINGTON, IA 52601	NEWSPAPER AD	242.50
6-2-04	ID# CK# 511	CRAFTSMAN PRESS 203 N. 3RD BURLINGTON, IA 52601	PRINTING CARDS	48.15
6-10-04	ID# CK# 512	VISA CARD P.O. BOX 3412 OMAHA, NE 68103-3412	YARD SIGNS	201.70
	ID# CK#			
	ID# CK#			

SUB-TOTAL $ 903.25

TOTAL ***(if last page of this schedule)*** $ 903.25

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

COMMITTE to ELECT MAX LAWSON

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SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
5-15-04	NANCY SHULTE & JAMES WYATT 2556 SURREY RD BURLINGTON, IA 52601		FOOD, BEVERAGES, & POSTAGE	$ 400.00	✓
6-30-04	MAX LAWSON 1801 GRUBE BURLINGTON, IA 52601	CANDIDATE	LOAN FORGIVEN	95.93	

SUB-TOTAL $ 495.93

TOTAL (if last page of this schedule) $ 495.93

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) 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 F (Rev. 07/03)	LOANS RECEIVED & REPAID

☐ CHECK THIS BOX IF AMENDING FORM

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

Committee to Elect Max Lawson

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD $ 400.00

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
			$

TOTAL *(PART I)* $ _____

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
			$
6/30/04	MAX LAWSON 1801 GRUBE BURLINGTON, IA 52601	CANDIDATE	304.07

TOTAL CASH REPAYMENTS *(PART II)* $ 304.07

From Schedule E – TOTAL LOANS FORGIVEN $ 95.93

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD $ -0-

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