

Dubugue

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

Reset Form

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

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>17652</u>
Logged In	
Scanned	
Computer	
Audited	

CANDIDATE COMMITTEES ONLY:

Candidate Name <u>Christine M. Ross</u>	Political Party <u>Republican</u>
Office Sought <u>Dubugue County</u>	District (if Senate or House) <u>N.A.</u>

John Lukasik
SIGNATURE OF TREASURER (or person filing this report)

563-870-4665
TELEPHONE

14 July 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 19 July 2004 REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate one 1

CHECK IF AMENDMENT TO REPORT DATED JUL 16 2004
FAX

Local Committees, enter Date of Election
02 Nov 04

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

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.)	\$	<u>503.29</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1295.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0.00</u>
(Schedule H applies to Candidates' Committees Only)		
	SUB-TOTAL	<u>1799.29</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>695.75</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0.00</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>1102.54</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>550.00</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>76.77</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0.00</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	

For Instructions, See Back of Form

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CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Ross 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
05/19/04	ID# N.A. CK#	Boffelli, Terry & Lynn 23260 Copley Hill Rd. Holy Cross, Ia. 52053	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
05/19/04	ID# N.A. CK#	Schneider, Darlene 606 Main St. Holy Cross, Ia. 52053	N.A.	\$ 25.00	<input checked="" type="checkbox"/>
05/19/04	ID# N.A. CK#	Ross, Kay 1021 SUNSHINE ST. Holy Cross, Ia. 52053	N.A.	\$ 25.00	<input checked="" type="checkbox"/>
05/19/04	ID# N.A. CK#	Lauferburg, Phyllis 3125 Pennsylvania Ave. Dubuque, Ia. 52001	N.A.	\$ 25.00	<input checked="" type="checkbox"/>
05/19/04	ID# N.A. CK#	GoAR, Deborah 915 Stone Ridge Pl. Dubuque, Ia. 52001	N.A.	\$ 25.00	<input checked="" type="checkbox"/>
05/19/04	ID# N.A. CK#	Brimeyer, Fred & Judy 43208 Great River Rd. Holy Cross, Ia.	Brother	\$ 50.00	<input checked="" type="checkbox"/>
05/19/04	ID# N.A. CK#	Taylor, Charlie & Lois P.O. Box 15 Syersville, Ia. 52040	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
05/18/04	ID# N.A. CK#	Quezada, Maritza Brimeyer 1055 Blue Jay Dr. Peosta, Ia. 52068	Sister IN LAW	\$ 25.00	<input checked="" type="checkbox"/>
05/19/04	ID# N.A. CK#	Schmitt, Don & Janet 25226 Rt. 52N. Holy Cross, Ia.	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
05/19/04	ID# N.A. CK#	Feldmann, Les & Joan 20007 Klein Ln. Durengo, Ia. 52039	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 375.	
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.

For Instructions, See Back of Form

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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)
Ross 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.

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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
05/19/04	ID# CK# N.A.	Wernke, Roger & Ann Mae 25564 Rt. 52 N. Holy Cross, Ia. 52053	N.A.	\$ 25.00	<input checked="" type="checkbox"/>
05/19/04	ID# CK# N.A.	Steffen, Pam 213 E. Main St. Luxemburg, Ia. 52056	Sister	\$ 25.00	<input checked="" type="checkbox"/>
05/19/04	ID# CK# N.A.	Hefel, Steve 42611 Heiderscheit Rd. Holy Cross, Ia. 52053	Aunt	\$ 25.00	<input checked="" type="checkbox"/>
05/19/04	ID# CK# N.A.	Sigwarth, Leon & Laura 23311 James Rd. Holy Cross, Ia. 52053	Aunt/ Uncle	\$ 50.00	<input checked="" type="checkbox"/>
05/17/04	ID# CK# N.A.	Lukasik, John & Sue 23083 Coffee Hill Rd. Holy Cross, Ia. 52053	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
05/19/04	ID# CK# N.A.	Juenger, D. J. 928 Park View Dr. Holy Cross, Ia. 52053	N.A.	\$ 25.00	<input checked="" type="checkbox"/>
05/19/04	ID# CK# N.A.	Hefel, Skip & Sue 9836 Janelle Ct. Dubuque, Ia. 52003	Cousin	\$ 55.00	<input checked="" type="checkbox"/>
05/19/04	ID# CK# N.A.	Marsis, Pat & Debra 666 Main St. Holy Cross, Ia. 52053	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
05/19/04	ID# CK# N.A.	Schneider, Charlie & Jean 26462 Schneider Rd. Holy Cross, Ia. 52053	N.A.	\$ 500.00	<input checked="" type="checkbox"/>
05/15/04	ID# CK# N.A.	Republican Party Central Com. P.O. Box 1052 Dubuque, Ia. 52001	N.A.	\$ 300.00	<input type="checkbox"/>
SUB-TOTAL				\$ 655.	
TOTAL (if last page of this schedule)				\$	

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Ross 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(8), 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
05/19/04	ID# CK# N.A.	Burkart, Charlie 2565 Mineral St. Dubuque, Ia. 52001	N.A.	\$ 50.00	<input type="checkbox"/>
05/18/04	ID# CK# N.A.	Ross, Lois 968 Main St. Holy Cross, Ia. 52053	N.A.	\$ 15.00	<input type="checkbox"/>
05/19/04	ID# CK# N.A.	Osterhaus, Richard & Sharon 509 4th Ave. S.E. Dyersville, Ia. 52040	N.A.	\$ 25.00	<input type="checkbox"/>
05/31/04	ID# CK# N.A.	Wilgenbusch, Melvin 20066 St. Joseph Dr. Richardsville, Ia. 52039	N.A.	\$ 50.00	<input type="checkbox"/>
06/27/04	ID# CK# N.A.	Steckel, Vincent & Lorette 18962 Balltown Rd. Sherrill, Ia. 52073	N.A.	\$ 20.00	<input type="checkbox"/>
06/27/04	ID# CK# N.A.	Madden, Charles 2330 Garfield Av. Dubuque, Ia. 52001	N.A.	\$ 25.00	<input type="checkbox"/>
05/22/04	ID# CK# N.A.	Daly, Jim & Catherine 26231 North Bankston Rd SPURTH, Ia. 52045	N.A.	\$ 30.00	<input type="checkbox"/>
05/19/04	ID# CK# N.A.	Lukan, Steve P.O Box 15 New Vienna, Ia 52065	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 265.	
TOTAL (if last page of this schedule)				\$ 1295.	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY 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)
Ross 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
5/18/04	ID# N.A. CK# 301	CHRISTINE M. ROSS P.O. Box 372 884 MAIN ST. Holy Cross, IA, 52053	U.S. Post Office Box # & Keys	\$ 26.00
5/18/04	ID# N.A. CK# 302	ADVANTAGE SIGN # 1017 N. Franklin St Manchester, Ia 52057	Magnetic Door Signs	90.95
5/19/04	ID# N.A. CK# 305	Neumann's Bar & Grille 927 MAIN ST. Holy Cross, Ia. 52053	FUND RAISER FOOD & ROOM	430.00
5/22/04	ID# N.A. CK# 306	Farber Bag 8733 Kapp Dr. Peosta, Ia. 52068	PRINTING OF FUND RAISER TICKETS	18.19
6/22/04	ID# N.A. CK# 307	Printers Plus 1076 University Ave. Dubuque, Ia. 52001	Post Cards & Brochures	91.90
7/02/04	ID# N.A. CK# 308	Mayers Cox Co. 8797 Kapp Dr. Peosta, Ia. 52068	Candy for Parade	38.71
	ID#			
	CK#			
	ID#			
	CK#			

SUB-TOTAL \$695.75
TOTAL (if last page of this schedule) \$695.75

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)(f).)

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COMMITTEE NAME (Must be same as on Statement of Organization)
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SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> 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
06/04/04	Helmer, Werner 15538 Timber Range Trail Durango, Ia. 52039	N.A.	2000 Business Cards	\$ 76.77	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
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					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 76.77
 TOTAL (if last page of this schedule) \$ 76.77

*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.