

Dubuque

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	17652
Logged In	
Scanned	
Entered	

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

Ross for Auditor

IMPORTANT: Indicate type of committee you are reporting for: A

(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 Christine M. Ross Political Party Republican

Office Sought Dubuque County Auditor District (if Senate or House) N.A.

FILED
OCT 15 2004
VARIABLE CAMPAIGN DISCLOSURE BOARD

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

TELEPHONE 563-870-4665

DATE SIGNED 4 October 04

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 October 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	<u>02 Nov 04</u>
County & Local Committees, enter County in which Election is held	<u>Dubuque County</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.)\$ 1102.54

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1470.00

Schedule F: Loans Received total (Attach Schedule F) 0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL\$ 2572.54

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 1499.92

Schedule F: Loan Repayments total (Attach Schedule F)..... 0.00

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$ 1072.62

**UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 0.0

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ 0.0

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 0.0

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

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 88B.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
7/27/04	ID# CK# N.A.	Lukan, Steve P.O. Box 15 New Vienna, Ia 52065	N.A.	\$ 20.00	<input checked="" type="checkbox"/>
7/27/04	ID# CK# N.A.	Joe & Helen Ertl 507 13th Ave S.E. Dyersville, Ia. 52040	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
7/27/04	ID# CK# N.A.	David & Joan Kramer 104 5th St. S.E. Dyersville, Ia. 52040	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
7/27/04	ID# CK# N.A.	Dr. & Mrs. Donald Kahle 1750 Mt. Vernon Ct. Dubuque, Ia. 52003	N.A.	\$ 20.00	<input checked="" type="checkbox"/>
7/27/04	ID# CK# N.A.	N. J. Yiannias P.O. Box 3127 Dubuque, Ia. 52004	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
7/27/04	ID# CK# N.A.	Werner Hellmer P.O. Box 1st Ave Dyersville, Ia. 52040	N.A.	\$ 25.00	<input checked="" type="checkbox"/>
7/27/04	ID# CK# N.A.	Ed. & Shirley Babka 451 River View Terrace Dubuque, IL. 61025	N.A.	\$ 200.00	<input checked="" type="checkbox"/>
08/09/04	ID# CK# N.A.	Charles Burkert 2565 Mineral St. Dubuque, Ia. 52001	N.A.	\$ 100.00	<input type="checkbox"/>
9/30/04	ID# CK# N.A.	Republican Party Central Com. P.O. Box 1052 Dubuque, Ia. 52001	N.A.	\$ 300.00	<input type="checkbox"/>
08/02/04	ID# CK# N.A.	Arnold Nonkamp 1050 Prince Phillip Dr. Dubuque, Ia. 52003	N.A.	\$ 25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$840.00	
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

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 FOI FUND-RAISER INCOME
8/02/04	ID# CK# N.A.	TOM & RUTH LUCAS 1102 2nd ST. S.W. EYERSVILLE, IA. 52040	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
8/02/04	ID# CK# N.A.	MARY J. CHAPMAN 435 MOORE HTS. DUBUQUE, IA. 52003	N.A.	\$ 50.00	<input checked="" type="checkbox"/>
8/02/04	ID# CK# N.A.	JIM & CATHY HEAVENS 866 5th ST. S.W. EYERSVILLE, IA. 52040	N.A.	\$ 20.00	<input checked="" type="checkbox"/>
9/30/04	ID# CK# N.A.	Rudy Bellmann 1000 Richards Rd. Dubuque, Ia. 52003	N.A.	\$ 10.00	<input type="checkbox"/>
8/26/04	ID# CK# N.A.	Republican Party Central Com. P.O. BOX 1052 Dubuque, Ia - 52001	N.A.	\$ 500.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<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				\$ 630.00	
TOTAL (if last page of this schedule)				\$ 1470.00	

* 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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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE **B**
(Rev. 07/03) MONETARY EXPENDITURES

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
7/17/04	ID# NA. CK# 309	U.S. Postal Service ██████████ MAPLE ST. Holy Cross, Ia 52053	Postage stamps for Fund Raiser	\$ 37.00
7/17/04	ID# N.A. CK# 310	Farber Bag 8733 Kapp Dr. Peosta, Ia. 52068	Note Pads	551.05
7/18/04	ID# N.A. CK# 311	Advantage Sign 1017 N. FRANKLIN MANCHESTER IA. 52057	magnetic Sign for Car	32.10
7/27/04	ID# N.A. CK# 312	Printers Plus 1076 University Ave Dubuque, Ia. 52001	Biographical Literature	50.50
8/05/04	ID# NA CK# 313	Myers Cox Co. 8797 Kapp Dr. Peosta, Ia. 52068	CANDY for Parade	38.71
8/07/04	ID# NA. CK# 314	Dr. George DDS. 119 4th St SE MERSVILLE IA 52040	Dental Floss for Parade	17.50
9/03/04	ID# NA. CK# 315	Capitol Promotions 2362 OAKDALE AVE. P.O. Box 231 GLANVILLE, PA. 19038	YARD SIGNS	597.24
9/03/04	ID# N.A. CK# 316	Printers Plus 1076 UNIVERSITY AVE. Dubuque, Ia. 52001	Biographical Literature	82.22
SUB-TOTAL				\$ 1406.32
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)(f).)

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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
9/09/04	ID# NA. CK# 317	<i>GOLDEN VIEW 1000 Richards Rd. Dubuque, Ia. 52003</i>	<i>News Paper Add</i>	\$ 85.00
9/10/04	ID# NA. CK# 318	<i>MYERS COX 8797 KAPP DR. Peosta, Ia. 52068</i>	<i>CANDY FOR PARADE</i>	\$ 8.60
	ID# CK#			

SUB-TOTAL \$ 93.60

TOTAL (if last page of this schedule) \$ 1499.92

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).)