

# DISCLOSURE SUMMARY PAGE

Reset Form

<b>FORM DR-2</b> (Rev. 07/2003)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	17553
Logged In	sb
Scanned	
Computer	sb
Audited	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
*Committee to Elect Sandi Buge*  
*for Emmet County Measure*

**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: Sandi Buge Political Party: Republican

Office Sought: County Measure District (if Senate or House): \_\_\_\_\_

**ETHICS & CAMPAIGN DISCLOSURE BOARD**

MAY 24 2004  
 PM 5:19:04  
 FILED E 18 04

*Sandi Buge*  
 SIGNATURE OF TREASURER (or person filing this report)

712-362-3203  
 TELEPHONE

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

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  
3-9-04

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

**STATEMENT OF CASH ON HAND**

<b>CASH ON HAND</b> at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount <b>MUST</b> 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>.00</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>100.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>100.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>.00</u>
<b>(Schedule H applies to Candidates' Committees Only)</b>		
	<b>SUB-TOTAL .....</b>	<b>\$ <u>200.00</u></b>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>.00</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>.00</u>
<b>CASH ON HAND</b> at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>200.00</u>
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$	<u>200.00</u>
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$	<u>1058.60</u>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$	<u>.00</u>
<b>CANDIDATE COMMITTEES ONLY:</b>		
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$	<u>.00</u>

For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (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)  
 Committee to Elect Sande Grage  
 for Emmet County Treasurer

**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
2-9-04	ID# CK#	Van Grage 103 N. 8th St. Estherville IA 51334		\$50.00	<input type="checkbox"/>
2-11-04	ID# CK#	Dorothea Grage 1167-360th Ave. Estherville IA 51334	Mother In Law	\$50.00	<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL  
**\$100.00**  
**TOTAL (if last page of this schedule)**  
**\$100.00**

\* 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.



SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Committee to Elect Sando Guge  
 for Emmet County Treasurer*

Reset 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
2-25-04	Emmet Co. Republican Central Committee P.O. Box 114 Estherville, IA		Meet the Candidate Coffee	\$ 70.00	<input type="checkbox"/>
2-27-04	"		"	\$ 59.06	<input type="checkbox"/>
3-1-04	"		Armstrong Newspaper Ad	\$ 74.25	<input type="checkbox"/>
3-4-04	"		Estherville Daily News Ad	\$ 151.20	<input type="checkbox"/>
1-30-04	Gerald Guge 203 S. 9th St Estherville IA 57334	Husband	Lumber & Paint for Signs	147.51	<input type="checkbox"/>
2-17-04	"	"	Campaign Buttons	63.75	<input type="checkbox"/>
2-23-04	"	"	Printer Ink for Flyers	53.27	<input type="checkbox"/>
2-24-04	"	"	Printing of door flyers	131.86	<input type="checkbox"/>
3-1-04	"	"	Newspaper ads	117.70	<input type="checkbox"/>
3-8-04	"	"	Radio Ads	90.00	<input type="checkbox"/>
SUB-TOTAL				\$	
				958.60	
TOTAL (if last page of this schedule)				\$	

\*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.

SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Committee to Elect Sandy Gage  
 for Emmet County Iowa*

Reset 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
	<i>Gerald Gage 203 S. 9th St. Estherville IA 57334</i>	<i>Husband</i>	<i>Loan of Campaign Funds</i>	<i>\$ 100.00</i>	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ *100.00*

TOTAL (if last page of this schedule) \$ *1058.60*

\*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.



**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

SCHEDULE  
**G**  
(Rev. 02/96)

BREAKDOWN  
OF MONETARY  
EXPENDITURES  
BY CONSULTANT

Reset Form

CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Committee to Elect Sandi Grage  
for Emmet County Treasurer*

**PART I - NAME AND ADDRESS OF CONSULTANT**

Name of Consultant		
Mailing Address		
City	State	Zip Code

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From _____ To _____	\$ _____

**ESTIMATES OF PERFORMANCE**


**PART II - ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)**

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
			\$

SUB-TOTAL \$ .00  
TOTAL (If last page of this schedule) \$ .00

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COMMITTEE NAME (Must be same as on Statement of Organization)  
*Committee to Elect Sandi Guge  
 for Emmet County Treasurer*

Reset Form

SCHEDULE <b>H</b> (Rev. 07/03)	CAMPAIGN PROPERTY
ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

**PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY \*\***

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$           .00          

\*\* PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$           .00           TOTALS \$ .00 \$ .00

\* If estimated, show **est.** beside figure.

(Attach Additional Schedules if Needed)