

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>9064</u>	
Logged In <u>KS</u>	
Scanned _____	
Computer _____	
Audited _____	

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

Emmet County Democratic Central Committee

IMPORTANT: Indicate by # type of committee you are reporting for: 4

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name _____ Political Party (if applicable) _____

Office Sought _____ District (if Senate or House) _____

Late reports are subject to possible civil and criminal penalties.

Michelle Erickson
SIGNATURE OF PERSON FILING REPORT

712-362-5190
TELEPHONE

10-18-04
DATE SIGNED

I AM FILING A October 19, 2004 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED 001 & 2 2004 PM 10-19-04

Check if this is final (termination) report and attach ~~Notice of Dissolution Form DR-3~~.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election _____

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

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds 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.)	\$ 410.96
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1260.00
Schedule F: Loans Received total (Attach Schedule F)	0
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL	\$ 1670.96
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	506.70
Schedule F: Loan Repayments total (Attach Schedule F)	0
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 1164.26
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 246.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 0
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	<input type="checkbox"/> YES <input type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ _____

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)
Emmet County Democratic Central Committee

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
8/6/04	ID# CK#	Carol Johnson-Miller, PO Box 113, Estherville, IA	N/A	\$100.00	<input type="checkbox"/>
10-6-04	ID# CK# 1606	Michele Erickson, 1232 N. 8th, Estherville, IA	N/A	50.00	<input checked="" type="checkbox"/>
10/6/04	ID# CK# 6014	Ann Thomsen, 809 14th Ave N, Estherville, IA	N/A	25.00	<input checked="" type="checkbox"/>
10/6/04	ID# CK# 2469	Marcella Frevert, 3655 450 Ave, Emmetsburg, IA	N/A	125.00	<input checked="" type="checkbox"/>
10/6/04	ID# CK# 2584	Sheryl Williams, 1413 N. 6, Estherville, IA	N/A	25.00	<input checked="" type="checkbox"/>
10/6/04	ID# CK# 5880	Dorthy Mergen, 9 Grandview Dr., Estherville, IA	N/A	30.00	<input checked="" type="checkbox"/>
10/6/04	ID# CK# 8268	Dale Juhl, 108 Westwood Dr., Estherville, IA	N/A	50.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 3273	Joyce Moglestad, 1003 1st Ave N, Estherville, IA	N/A	25.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 8540	Lois Heskett, 221 S 13th St, Estherville, IA	N/A	10.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 5843	Kathleen Graves, 39 Manor Circle, Estherville, IA	N/A	20.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 460.00	
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.

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME *(Must be same as on Statement of Organization)*
 Emmet County Democratic Central Committee

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10-6-04	ID# CK# 1592	Grace Spalding, 302 N 19, Estherville, IA	N/A	\$25.00	<input checked="" type="checkbox"/>
10/6/04	ID# CK# 2161	Vickie Jurens, 321 N 17th Ct., Estherville, IA	N/A	25.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 2132	Ronald Smith, 1271 470th Ave, Estherville, IA	N/A	50.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 9298	Carol Ridout, 1215 2nd Ave N, Estherville, IA	N/A	50.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 3233	Ruth Moorberg, RR 2 Box 137, Estherville, IA	N/A	20.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 7797	John Nelson, 18 Alexander Rd, Estherville, IA	N/A	100.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 2728	Mitchell Juergens, 219 2nd St, Estherville, IA	N/A	25.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 6642	Linda, McKay, 104 Walnut, Ringsted, IA	N/A	20.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 7166	Susan Rink, 1515 Central Ave, Estherville, IA	N/A	15.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 8995	Susan Snyder, 3868 150th St., Estherville, IA	N/A	20.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 350.00	
TOTAL (if last page of this schedule)				\$	

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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)*
Emmet County Democratic Central Committee

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
10/06/04	ID# CK# 5862	Amber Houge, 421 N 5 St, Estherville, IA	N/A	\$15.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK# 3400	Wayne West, 4180 Highway 9, Estheville, IA	N/A	10.00	<input checked="" type="checkbox"/>
10/06/04	ID# CK#	Cash donations-Democratic Chili Feed	N/A	425.00	<input checked="" 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				\$ 450.00	
TOTAL (if last page of this schedule)				\$ 1260.00	

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

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

Emmet County Democratic Central Committee

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
9/12/04	ID# CK# 527	Tom Lewis, 727 W 7th St N, Estherville, IA	Rent-Headquarters	\$ 200.00
9/21/04	ID# CK# 528	Spindrift, Iowa Lakes Community College, 19 South 7th St, Estherville, IA	Advertising	60.00
9/22/04	ID# CK# 529	Estherville Daily News, 10 N 7, Estherville, IA	Advertising	129.20
9/29/04	ID# CK# 530	Emmet County Auditor, Court House, Estherville, IA	Lists	30.00
10/12/04	ID# CK# 531	Armstrong Journal, 520 6th St, Armstrong, IA	Advertising	87.50
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 506.70
TOTAL (if last page of this schedule)				\$ 506.70

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)
 Emmet County Democratic Central Committee

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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
10/14/04	Neal Armstrong, Gruver, IA	N/A	Food for Chili Feed Fundraiser	\$ 246.00	<input checked="" 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				\$ 246.00	
TOTAL (if last page of this schedule)				\$ 246.00	

*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.