

*Jayette*

# Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

### COMMITTEE NAME

Official Name of Committee	
<i>Kennedy For County Supervisor # 17179</i>	
Street	
<i>503 5<sup>TH</sup> ST NW</i>	
City, State, Zip Code	
<i>Oelwein, Ia. 50662</i>	
Area Code	Telephone
<i>319</i>	<i>283-3386</i>

JAN - 3 2003

Effective date of dissolution:

*JANUARY 3*, 20 *03*

*[Signature]*  
Signature of Treasurer

*1/3/03*  
Date Signed

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with Iowa Code section 58.42 and rule 351 IAC 4.42.

*Michael J. Kennedy*  
Signature of Candidate - Required for Candidate's Committee

*1-3-03*  
Date signed

#### WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached. The final bank statement may be sent in later if it is not available at the time the Notice of Dissolution is filed.

#### FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

FORM	(Rev. 02/02)
<b>DR-3 NOTICE OF DISSOLUTION</b>	
<b>For Office Use Only</b>	
Comm. #	<i>17179</i>
Indexed	<i>SD</i>
Audited	
Computer	<i>db</i>
Certified Date of Dissolution	