

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003) DISCLOSURE REPORT For Office Use Only Comm. # 9066 Logged in Scanned Computer Audited

COMMITTEE NAME (Must be same as on Statement of Organization) FAYETTE COUNTY DEMOCRATIC CENTRAL COMMITTEE

IMPORTANT: Indicate type of committee you are reporting for: 7 (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 (8) Support Slate of Candidates

CANDIDATE COMMITTEES ONLY: Candidate Name Political Party Office Sought District (if Senate or House)

SIGNATURE OF TREASURER (or person filing this report) Andrea Byrd Telephone 319 283 1536 Date Signed 7-19-2004

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A JULY 19 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 County & Local Committees, enter County in which Election is held

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.) \$ 6,140.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 591.32 Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) \$ 6,731.32

**UNPAID BILLS (From Schedule D - Attach Schedule D) **IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) **OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

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

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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)

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
5-11-04	ID# CK#	ROGER THOMAS 17658 DOMINO ROAD ELKADER, IA 52043		\$ 25.00	<input type="checkbox"/>
5-11-04	ID# CK#	ANDREA DRYER 109 6TH AVE. SE OELWEIN, IA 50662		20.00	<input type="checkbox"/>
5-11-04	ID# CK#	UNITEMIZED CONTRIBUTIONS PASS-THE-HAT AT MONTHLY MEETING		106.00	<input type="checkbox"/>
6-1-04	ID# CK#	RON MYROM 348 S. VINE WEST UNION, IOWA		25.00	<input type="checkbox"/>
6-1-04	ID# CK#	PATT TAYLOR 2057 NEON RD. OELWEIN, IA 50662		25.00	<input type="checkbox"/>
6-1-04	ID# CK#	STEVE STORY 1883 250TH ST. HAWKEYE, IA 52147		55.00	<input type="checkbox"/>
6-1-04	ID# CK#	OLIVIA PLEGGENKUHLE 21942 210TH ST. HAWKEYE, IA 52147		10.00	<input type="checkbox"/>
6-1-04	ID# CK#	DONALD (JAKE) BLITSCH 720 8TH AVE. NE OELWEIN, IA 50662		25.00	<input type="checkbox"/>
6-1-04	ID# CK#	UNITEMIZED CONTRIBUTIONS PASS-THE-HAT AT MONTHLY MEETING		101.00	<input type="checkbox"/>
7-1-04	ID# CK#	DIVIDENDS - CERTIFICATE OF DEPOSIT AT JOHN DEERE COMMUNITY CREDIT UNION		29.32	<input type="checkbox"/>
				SUB-TOTAL	
				\$421.32	
				TOTAL (if last page of this schedule)	
				\$	

(\$29.37, less \$.05 overstate-
ment from last report, filed
for 5-19)

* 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)

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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
7-13-04	ID# CK#	ANDREA DRYER 109 6TH AVENUE SE OELWEIN, IOWA 50662		\$ 25.00	<input type="checkbox"/>
7-13-04	ID# CK#	ROBERT HUCK 2616 BEAR RD. WADENA, IOWA 52169		50.00	<input type="checkbox"/>
7-13-04	ID# CK#	CAROL MULLINS P.O. BOX 33 WESTGATE, IOWA 50681		20.00	<input type="checkbox"/>
7-13-04	ID# CK#	UNITEMIZED CONTRIBUTIONS PASS-THE-HAT AT MONTHLY MEETING		75.00	<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"/>
SUB-TOTAL				\$ 170.00	
TOTAL (if last page of this schedule)				\$ 591.32	

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