

# DISCLOSURE SUMMARY PAGE

Reset Form

*Floyd*

<b>FORM DR-2</b> (Rev. 07/2004)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	<u>17774</u>
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

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

Lynch for Sheriff

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**IMPORTANT:** Indicate by # type of committee you are reporting for: 5  
 ( 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)
Rick A. Lynch	Independent
Office Sought	District (if Senate or House)
Floyd County Sheriff	

Late reports are subject to possible civil and criminal penalties.

*[Signature]* 641 257-1919 10/16/04  
**SIGNATURE OF PERSON FILING REPORT** **TELEPHONE** **DATE SIGNED**

I AM FILING A July 15 - Oct. 14 2004 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
 (report date) 10/15/04 Indicate by #  1

- CHECK IF AMENDMENT TO REPORT DATED PM 10-15-04
- 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
Floyd

## 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.) ..... \$ 0.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) .....	<u>5050.00</u>
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 ..... \$** 5050.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....	<u>1385.50</u>
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) ..... \$ 3664.50

<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D) .....	\$ _____
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	\$ <u>501.00</u>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F) .....	\$ _____

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANTS BREAKDOWN** (Schedule G Attached?)  YES  NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \$ \_\_\_\_\_

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)

Lynch For Sheriff

**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
08/22/04	ID# CK#	Rick A. Lynch 904 9th St. Charles City, IA 50616	Candidate	\$750.00	<input type="checkbox"/>
08/22/04	ID# CK#	Thomas Wohlers 1935 Gil Ave. Charles City, IA 50616		500.00	<input type="checkbox"/>
08/22/04	ID# CK#	William R. Wohlers 1467 Windfall Ave. Charles City, IA 50616		350.00	<input type="checkbox"/>
08/22/04	ID# CK#	William H. Wohlers 111 Oliver St. Charles City, IA 50616		300.00	<input type="checkbox"/>
08/25/04	ID# CK#	Kathy Franke 1585 Underwood Ave. Charles City, IA 50616		100.00	<input type="checkbox"/>
09/15/04	ID# CK#	Cindy Peters 717 NW Scott St. Ankeny, IA 50021	Sister	60.00	<input type="checkbox"/>
09/15/04	ID# CK#	Robin Riesbeck 4673 Lakewood Dr. Norwalk, IA 50211	Sister	60.00	<input type="checkbox"/>
09/20/04	ID# CK#	Al Manning 1404 Colwell Ave. Charles City, IA 50616		60.00	<input type="checkbox"/>
09/22/04	ID# CK#	Steve Shannon 809 7th Ave. Charles City, IA 50616		100.00	<input type="checkbox"/>
09/22/04	ID# CK#	Vicki Tiedemann 901 7th St. Charles City, IA 50616		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2380.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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 <b>A</b> (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)  
Lynch for Sheriff

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09/22/04	ID# CK#	Dave Bledsoe 704 7th Ave. Charles City, IA 50616		\$60.00	<input type="checkbox"/>
9/28/04	ID# CK#	David Jarvill 204 3rd Ave Charles City, IA 50616		50.00	<input type="checkbox"/>
9/28/04	ID# CK#	William Fenholt 205 Bunt St. Charles City, IA 50616		60.00	<input type="checkbox"/>
9/28/04	ID# CK#	Donald W. Olejniczak 1604 Salzer Charles City, IA 50616	Uncle	50.00	<input type="checkbox"/>
9/28/04	ID# CK#	WG Herbrechtsmeyer 1005 Court St. Charles City, IA 50616		60.00	<input type="checkbox"/>
9/28/04	ID# CK#	Mark Sindlinger 1002 Ellis Dr. Charles City, IA 50616		60.00	<input type="checkbox"/>
9/29/04	ID# CK#	Brian Crane 1737 Redwood Ave Charles City, IA 50616		50.00	<input type="checkbox"/>
9/29/04	ID# CK#	Dan and Sally Frudden 806 Ellis Dr. Charles City, IA 50616		40.00	<input type="checkbox"/>
9/29/04	ID# CK#	JR Herbrechtsmeyer 812 9th St. Charles City, IA 50616		100.00	<input type="checkbox"/>
9/29/04	ID# CK#	Lyle and Dawn Staudt 2680 230th St. Charles City, IA 50616		50.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 580.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

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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)  
Lynch for Sheriff

**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.

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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
9/29/04	ID# CK#	Lyle Schlader 601 Freeman St. Charles City, IA 50616		\$65.00	<input type="checkbox"/>
10/05/04	ID# CK#	Paul Sisson 2939 Wedgewood Estates Pl. Charles City, IA 50616		60.00	<input type="checkbox"/>
10/05/04	ID# CK#	Gene and Connie Parson 3228 Hwy. 18 Charles City, IA 50616		100.00	<input type="checkbox"/>
10/07/04	ID# CK#	Heidi Worrall 703 Kellogg Ave. Charles City, IA 50616		30.00	<input type="checkbox"/>
10/10/04	ID# CK#	Rick Murray 2371 150th St. Floyd, IA 50435		50.00	<input type="checkbox"/>
10/10/04	ID# CK#	Jim Zbornik 101 Clark St. Charles City, IA 50616		100.00	<input type="checkbox"/>
10/11/04	ID# CK#	Penny Gray 908 9th St. Charles City, IA 50616		30.00	<input type="checkbox"/>
10/11/04	ID# CK#	Dean Marzen 1105 S. Grand Ave. Charles City, IA 50616		200.00	<input type="checkbox"/>
10/11/04	ID# CK#	JE Kelly 1001 Harvey St. Charles City, IA 50616		50.00	<input type="checkbox"/>
	ID# CK#	Unitemized Contributions		1405.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 2090.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 5050.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
Lynch for Sheriff

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
9/13/04	ID# CK# 1002	Secretary of State Iowa State Capital Building Des Moines, IA	Purchase list of registered voters	\$ 15.87
9/15/04	ID# CK#1004	U.S. Post Office 500 N. Main St. Charles City, IA 50616	Purchase stamps	444.00
9/20/04	ID# CK#1006	Cedar Valley Printing 203 N. Main St. Charles City, IA 50616	Purchase envelopes	97.88
9/24/04	ID# CK#1007	U.S. Post Office 500 N. Main St. Charles City, IA 50616	Purchase stamps	37.00
9/24/04	ID# CK# 1008	Cedar Valley Printing 203 N. Main St. Charles City, IA 50616	Purchase envelopes	14.45
9/25/04	ID# CK#1010	Theisens 90 S. Main St. Charles City, IA 50616	Purchase of Paint and lath for yard signs	72.94
9/25/04	ID# CK# 1009	U.S. Post Office 500 N. Main St. Charles City, IA 50616	Purchase stamps	73.50
9/28/04	ID# CK# 1001	Superior Lumber 2914 Hwy 18 Charles City, IA 50616	Purchase posts and screws for signs	30.26
SUB-TOTAL				\$ 785.90
<b>TOTAL (if last page of this schedule)</b>				\$

**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).)

**Reset Form**

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**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.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Lynch for Sheriff

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
9/28/04	ID# CK# 1011	U.S. Post Office 500 N. Main St. Charles City, IA 50616	Purchase stamps	\$ 37.00
9/29/04	ID# CK#1005	Jackson Street Press 708 N. Jackson St. Charles City, IA 50616	Purchase brochures	412.96
10/01/04	ID# CK#1013	Shell Rock Valley Times 110 W. Main Ave. Shell Rock, IA 50468	Purchase advertising	140.00
10/14/04	ID# CK#	Iowa Office Supply 506 S. President Ave. Mason City, IA 50401	Copies	9.64
	ID# CK#			
<b>SUB-TOTAL</b>				\$ 599.60
<b>TOTAL (if last page of this schedule)</b>				\$ 1385.50

**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)

Lynch for Sheriff

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SCHEDULE <b>E</b> (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
9/22/04	Jeff Sisson 901 Court St. Charles City, IA		Envelope stuffing	\$ 36.90	<input type="checkbox"/>
9/22/04	Tracey Lynch 904 9th St. Charles City, IA 50616	Wife	Envelope stuffing	36.90	<input type="checkbox"/>
9/22/04	Jennifer Wohlers 1935 Gil Ave Charles City, IA 50616		Envelope stuffing	36.90	<input type="checkbox"/>
9/22/04	Thomas Wohlers 1935 Gil Ave Charles City, IA 50616		Envelope stuffing	36.90	<input type="checkbox"/>
9/22/04	Steve Shannon 809 7th Ave Charles City, IA 50616		Envelope stuffing	36.90	<input type="checkbox"/>
9/22/04	Wendy Wandro 107 Ferguson St. Charles City, IA 50616		Envelope stuffing	36.90	<input type="checkbox"/>
9/28/04	Brian Lynch 303 L St. Charles City, IA 50616	Brother	Donated six sheets of plywood	132.00	<input type="checkbox"/>
9/28/04	Vicki Teidemann 901 7th St. Charles City, IA 50616		Making yard signs	73.80	<input type="checkbox"/>
9/28/04	Brian Teidemann 901 7th St. Charles City, IA 50616		Making yard signs	73.80	<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 501.00	
TOTAL (if last page of this schedule)				\$ 501.00	

\*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.