

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	9071
Logged In	SW NR
Scanned	
Computer	/
Audited	

COMMITTEE NAME (Must be same as on Statement of Organization)
 FRANKLIN COUNTY REPUBLICAN 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.

Kathya Bobst
 SIGNATURE OF PERSON FILING REPORT

641-456-2383
 TELEPHONE

7-15-2004
 DATE SIGNED

I AM FILING A MAY 15 TO JULY 14, 2004 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by # 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 DR-3 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. (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.)	\$ 569.96
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1,106.00
Schedule F: Loans Received total (Attach Schedule F)	00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ 1,675.96
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	00
Schedule F: Loan Repayments total (Attach Schedule F)	00
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 1,675.96

**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) \$ _____

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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)
FRANKLIN COUNTY REPUBLICAN 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
05/19/2004	ID# CK#	RICHARD A ALLBEE, PO BOX 436, HAMPTON IA 50441		\$100.00	<input type="checkbox"/>
05/19/2004	ID# CK#	DENNY EDWARDS, PO BOX 497, HAMPTON IA 50441		100.00	<input type="checkbox"/>
05/19/2004	ID# CK#	MRS JAMES E COONLEY, 21 FIFTH STREET SE, HAMPTON, IA 50441		100.00	<input type="checkbox"/>
05/19/2004	ID# CK#	MRS G. A. CADY, PO BOX 456, HAMPTON, IA 50441		100.00	<input type="checkbox"/>
05/19/2004	ID# CK#	MERLIN D. PLAGGE, 1146 QUAIL AVENUE, SHEFFIELD, IA 50475		100.00	<input type="checkbox"/>
05/19/2004	ID# CK#	JERRY L. PLAGGE, RT 1 BOX 10, LATIMER IA 50452		100.00	<input type="checkbox"/>
05/19/2004	ID# CK#	MRS. JAMES JORGENSEN JR. 1012 LARK AVENUE, HAMPTON IA 50441		50.00	<input type="checkbox"/>
05/19/2004	ID# CK#	CARLYN SCHWIEGER, 878 FINCH AVENUE, DOWS, IA 50071		100.00	<input type="checkbox"/>
05/19/2004	ID# CK#	HELEN O'DEA, 614 FIRST STREET NE HAMPTON, IA 50441		25.00	<input type="checkbox"/>
06/07/2004	ID# CK#	MRS EUGENE SUKUP, BEEDS LAKE, HAMPTON, IA 50441		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 875.00	
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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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
FRANKLIN COUNTY REPUBLICAN CENTRAL COMMITTEE

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06/07/2004	ID# CK#	VIRGINIA ANNE STOCKDALE 572 LEMON AVENUE, IOWA FALLS, IA 50126		\$100.00	<input type="checkbox"/>
06/16/2004	ID# CK#	CAROLINE ROTHER, 1465 CARDINAL AVE ALEXANDER, IA 50420		100.00	<input type="checkbox"/>
06/16/2004	ID# CK#	SUE TEGGATZ, 701 THIRD STREET NE HAMPTON, IA 50441		30.00	<input type="checkbox"/>
06/28/2004	ID# CK#	REFUND OF DEPOSIT FOR KEY TO POST OFFICE BOX		1.00	<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				\$ 231.00	
TOTAL (if last page of this schedule)				\$ 1,106.00	

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