

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	17673
Logged In	
Scanned	
Computer	
Audited	

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

SWEEDLER FOR SUPERVISOR

IMPORTANT: Indicate type of committee you are reporting for:

- (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 State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name

WESLEY SWEEDLER

Political Party

REPUBLICAN

Office Sought

HAMILTON COUNTY SUPERVISOR

District (if Senate or House)

FILED
NO CAMPAIGN DISBURSEMENTS REQUIRED
OCT 18 2004
18 OCT 2004
DATE SIGNED

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE 515-854-2400

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

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 19 OCT 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 <u>HAMILTON</u>

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.)

\$ 692.30

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

1689.00

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 \$ 2381.30

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

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

339.89

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)

\$ 2041.31

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 0

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 1000.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 0

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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)
SWEEDLER FOR SUPERVISOR

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 88B.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
JUL 23, 04	ID# CK#	MARYIN ELLIOTT 1415-220TH ST WEBSTER CITY, IA 50595		\$20.00	<input type="checkbox"/>
JUL 27, 04	ID# CK#	RICHARD + LISA LURA 117 KATHY LANE WEBSTER CITY, IA 50595		100.00	<input type="checkbox"/>
AUG 18, 04	ID# CK#	ROBERT MAASS 3525 ARBEN AVE ELLSWORTH, IA 50075		20.00	<input type="checkbox"/>
AUG 18, 04	ID# CK#	PATRICIA VUNGOLAS, 1322 GRAND ST. WEBSTER CITY, IA 50595		50.00	<input type="checkbox"/>
SEP 2, 04	ID# CK#	CRESTVIEW APARTMENTS 2401 DES MOINES ST. WEBSTER CITY, IA 50595		50.00	<input type="checkbox"/>
SEP 14, 04	ID# CK#	CASH IN BASKET AT FUND RAISER WILLIAMS COMMUNITY CENTER		169.00	<input checked="" type="checkbox"/>
SEP 14, 04	ID# CK#	HERB HALLELAND 305 3RD ST BLAIRSBURG, IA 50034		25.00	<input type="checkbox"/>
SEP 14, 04	ID# CK#	DALE BERGMAN (515-338-2493) STRATFORD, IA 50249		20.00	<input type="checkbox"/>
SEP 14, 04	ID# CK#	RICHARD CARLSON 601 BREWER WEBSTER CITY, IA 50595		65.00	<input type="checkbox"/>
SEP 14, 04	ID# CK#	DELMON CARTER 2280 Z WALKER AVE. WILLIAMS, IA 50271		20.00	<input type="checkbox"/>
SUB-TOTAL				\$539.00	
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
<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)
SWEEDLER FOR SUPERVISOR

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
14 SEP 04	ID# CK#	RUTH DICKSON RR1 WILLIAMS, IA 50271		\$ 25.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	DONALD DoolITTLE 908 N. TERRACE DR WEBSTER CITY, IA 50595		25.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	GEORGE EICAHORN 901 TENNYSON STRATFORD, IA 50249		50.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	GARY EVANS 819 PROSPECT ST WEBSTER CITY, IA 50595		25.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	RICHARD & JOANN GIDEL 2950-1907H ST WILLIAMS, IA 50271		100.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	ROBERT HANSEL 2680 VAIL AVE. WILLIAMS, IA 50271		25.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	LURLIN HOELSCHER 2271 VAIL AVE WILLIAMS, IA 50271		50.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	DAVID KEPLER 1105 KATHY LN. WEBSTER CITY, IA 50595		30.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	ROSS NISSEL 1619 LOCUST ST WEBSTER CITY, IA 50595		25.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	STANLEY SHELDON 500 PLEASANT ST WEBSTER CITY, IA 50595		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 455.00	
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)
SWEEDLER FOR SUPERVISOR

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 ICWA 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/YY)	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
14 SEP 04	ID# CK#	KL SWEEDLER 102 BEECH ST. WILLIAMS, IA 50271	FATHER	\$100.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	PHIL VOGE 610 HILLCREST DR. WEBSTER CITY, IA 50595		100.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	WAYNE WAHLERT 235 ZIEGLER AVE. WILLIAMS, IA 50271		20.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	DONALD WILLIAMS 3365 - 190TH ST WILLIAMS, IA 50271		100.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	DAVID YOUNG 2031 - 330TH ST STANHOPE, IA 50246		40.00	<input type="checkbox"/>
14 SEP 04	ID# CK#	DARYL HEMKEN 310 SPRUCE ST. WILLIAMS, IA 50271		2.00	<input type="checkbox"/>
16 SEP 04	ID# CK#	JASON KOHL 2794 - 260TH ST LAMAR, IA 50132		\$0.00	<input type="checkbox"/>
16 SEP 04	ID# CK#	KOHL FAMILY FARM 1940 QUINN AVE. BLAIRBURG, IA 50034		\$0.00	<input type="checkbox"/>
5 OCT 04	ID# CK#	WAYNE MARLENE ANDERSON 2158 VAIL AVE. WILLIAMS, IA 50271		100.00	<input type="checkbox"/>
OCT 5 04	ID# CK#	ROBERT S. SWENSON 2560 WOODWOOD AVE. WILLIAMS, IA 50271		100.00	<input type="checkbox"/>

SUB-TOTAL

\$695.00

TOTAL (if last page of this schedule)

\$1689.00

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)

SWEEDLER FOR SUPERVISOR

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
21 SEP 04	ID# CK# 1023	U.S. POSTAL SERVICE 208 MAIN ST WILLIAMS, IA 50271	STAMPS	\$ 92.00
OCT 5, 04	ID# CK# 1024	VIKING OFFICE PRODUCTS 950 W 190TH ST BARRANCE, IA 50502	PAPER	43.22
OCT 7, 04	ID# CK# 1025	CITY OF WILLIAMS PO. BOX 7 WILLIAMS, IA 50271	COMMUNITY CENTER RENT	75.00
OCT 11, 04	ID# CK# 1026	CINDI SWEEDLER 1896 VAIL AVE WILLIAMS, IA 50271	PAPER	26.56
OCT 11, 04	ID# CK# 1027	PRINTING SERVICES, INC	1500 ENVELOPES	103.11
	ID# CK#			
	ID# CK#			
	ID# CK#			

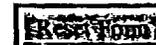
SUB-TOTAL \$ 339.89

TOTAL (if last page of this schedule) \$ 339.89

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).)



SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAYED
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1000.00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
			\$

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL (PART I) \$ _____

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E - TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1000.00

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