

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2
(Rev. 07/2004) DISCLOSURE REPORT

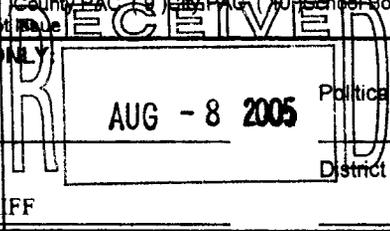
Hancock

COMMITTEE NAME (Must be same as on Statement of Organization)
MICHAEL C. HANSMEIER

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

For Office Use Only
Comm. # 17865
Logged In pm
Scanned _____
Computer pm
Audited _____

CANDIDATE COMMITTEES ONLY
Candidate Name: MICHAEL C. HANSMEIER
Office Sought: HANCOCK COUNTY SHERIFF
Political Party (if applicable): _____
District (if Senate or House): _____



Late reports are subject to possible civil and criminal penalties.

Michael Calvin Hansmeier
SIGNATURE OF PERSON FILING REPORT

641-565-3254
TELEPHONE

8/7/05
DATE SIGNED

I AM FILING A 8/08/05 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED 7/20/05

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
08/16/05
County & Local Committees, enter County in which Election is held
HANCOCK

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

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 100.00

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 \$ 100.00

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) \$ 0

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

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 1,178.54

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 0

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 100.00

For Instructions, See Back of Form

Reset Form

| | |
|--|------------------------------------|
| 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)
 MICHAEL C. HANSMEIER

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 |
|--|--|--|--|-----------------|-----------------------------|
| 07/29/05 | ID# CK# 2097 | ALAN A. LARSON 4400 N SCOTTSDALE RD. PMB255 SCOTTSDALE, AZ 85251 | | \$100.00 | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
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| | ID# CK# | | | | <input type="checkbox"/> |
| | ID# CK# | | | | <input type="checkbox"/> |
| SUB-TOTAL | | | | \$ 100.00 | |
| TOTAL (If last page of this schedule) | | | | \$ 100.00 | |

* 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.

| | |
|---|--------------------------|
| SCHEDULE E (Rev. 06/97) | IN-KIND CONTRIBUTIONS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)
MICHAEL C. HANSMEIER

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| 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 |
|---------------------------------------|---|---|-------------------------------------|-----------------------------|-----------------------------------|
| 06/02/05 | MICHAEL C. HANSMEIER - SELF 1015 330TH ST FOREST CITY, IA 50436 | SELF - CANIDATE | IA SECRETARY OF STATE | \$ 17.64 | <input type="checkbox"/> |
| 07/12/05 | SAME | SAME | GIFTS SEW SWEET - T SHIRTS | 262.52 | <input type="checkbox"/> |
| 07/14/05 | SAME | SAME | BRITT NEWS TRIBUNE - ADS | 234.00 | <input type="checkbox"/> |
| 07/14/05 | SAME | SAME | CHRIS WAGLER - SIGNS | 40.00 | <input type="checkbox"/> |
| 07/14/05 | SAME | SAME | GARNER LEADER- ADS | 135.90 | <input type="checkbox"/> |
| 07/14/05 | SAME | SAME | FOREST CITY SUMMIT - ADS | 66.00 | <input type="checkbox"/> |
| 07/18/05 | SAME | SAME | STAPLES - PRINTING & SHIRT DEC | 80.88 | <input type="checkbox"/> |
| 7/22/05 | SAME | SAME | WINNEBAGO PRINTING. | 160.85 | <input type="checkbox"/> |
| 7/26/05 | SAME | SAME | HANSON HARDWARE SIGN POST | 36.17 | <input type="checkbox"/> |
| 8/3/05 | SAME | SAME | WINNEBAGO PRINTING | 26.18 | <input type="checkbox"/> |
| SUB-TOTAL | | | | \$ | |
| TOTAL (if last page of this schedule) | | | | \$ | |
| | | | | 1060.14 | |

*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.

| | |
|---|--------------------------|
| SCHEDULE E (Rev. 06/97) | IN-KIND CONTRIBUTIONS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)
MICHAEL C. HANSMEIER

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| 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 |
|--------------------------|---|---|-------------------------------------|-----------------------------|-----------------------------------|
| 08/06/05 | MICHAEL C. HANSMEIER 1015 330th St. FOREST CITY, IA 50438 | SELF SAME | MARTIN BROTHERS, CANDY | \$ 43.55 | <input type="checkbox"/> |
| 08/06/05 | SAME | SAME | BEST BUY, PRINTER, CARTRAGES | 74.85 | <input type="checkbox"/> |
| | | | | | <input type="checkbox"/> |
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| | | | | | <input type="checkbox"/> |

SUB-TOTAL \$ 118.40
TOTAL (if last page of this schedule) \$ 1,178.54

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