

*Johnson*

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

### DISCLOSURE SUMMARY PAGE

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

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

**IMPORTANT:** Indicate type of committee you are reporting for:  4  
 ( 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: JOHN WEIHE Political Party: \_\_\_\_\_  
 Office Sought: CORALVILLE CITY COUNCIL District (if Senate or House): \_\_\_\_\_

29

*John A. Gill*  
 SIGNATURE OF TREASURER (or person filing this report)

319 351-6611  
 TELEPHONE

11/29/03  
 DATE SIGNED

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

**SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**

I AM FILING A Campaign Disclosure 12/1/03 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  
11/4/03

County & Local Committees, enter County in which Election is held  
JOHNSON

### 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.) ..... \$ 0

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 1310.-

Schedule F: Loans Received total (Attach Schedule F) ..... 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... 0

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** ..... \$ 1310.-

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ..... 1013.07

Schedule F: Loan Repayments total (Attach Schedule F) ..... 0

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... \$ 296.93

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

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... \$ 0

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

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES  NO

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

For Instructions, See Back of 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)  
**WEING FOR CORALVILLE**

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
10/15/03	ID# CK#	MARK PHILLIPS 400 PLAZA CENTRE ONE IOWA CITY, IA 52241		\$ 50.-	<input type="checkbox"/>
10/17/03	ID# CK#	CHARLES SKAUGSTAD 524 PARK RD. IOWA CITY, IA. 52246		100.-	<input type="checkbox"/>
10/22/03	ID# CK#	SUZANNE SUMMERWILL JAMES FRITZ 1807 BROWN DEER TRAIL CORALVILLE, IA		35.-	<input type="checkbox"/>
10/28/03	ID# CK#	HEWITLAND REGIONAL Council of 201 E. 3RD ST. CARPENTERS STERLING, IL. 61081-3945		250.-	<input type="checkbox"/>
10/31/03	ID# CK#	DAN & DEBRA FLICK 510 AUBURN HILLS DR. CORALVILLE, IA. 52241		25.-	<input type="checkbox"/>
10/28/03	ID# CK#	REX BRANDSTATTER 1006 5TH ST. CORALVILLE IA. 52241		25.-	<input type="checkbox"/>
10/28/03	ID# CK#	RANDY LARSON 4 LONGVIEW KNOLL IOWA CITY, IA. 52240		25.-	<input type="checkbox"/>
11/4/03	ID# CK#	AUBURN EAST LLC		100.-	<input type="checkbox"/>
10/27/03	ID# CK#	ALLAN ROOTS 10 OLDE HICKORY RIDGE CORALVILLE, IA 52241		50.-	<input type="checkbox"/>
10/24/03	ID# CK#	IOWA LABORERS 5806 MEREDITH DR. SUITE B URBANDALE, IA. 50322		100.-	<input type="checkbox"/>
SUB-TOTAL				\$ 760.-	
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.

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)  
**WEIHE FOR CORAUVILLE**

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
10-29-03	ID# CK#	IOWA STATE BUILDING & TRADES 110 10 <sup>th</sup> AVE, NW #6085 ALTOONA, IA 50009		\$ 100.-	<input type="checkbox"/>
10-30-03	ID# CK#	IOWA CITY CARPENTERS 705 S. CLINTON PAC # 6294 IOWA CITY, IA 52240		250.-	<input type="checkbox"/>
10-29-03	ID# CK#	RANDG'S 401 2ND ST. CORAUVILLE, IA. 52241		200.-	<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

\$ 550.-  
\$ 1310.-

TOTAL (if last page of this schedule)

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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)  
**WEIHE FOR CORALVILLE**

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
11/25/03	ID# CK#	MAILTECH	LABELS, MAIL, PREP, LETTERS, Political tags, POSTAGE.	\$239.06
11/30/03	ID# CK#	JOHN WEIHE 280 AUBURN HILLS DR CORALVILLE, IA 52241	VOTER LIST, TECHNIGRAPHICS US. POSTAL, OFFICE Depot PRINT TONK, PAPER.	551.41
11/25/03	ID# CK#	CARTER PRINTING 1739 EAST GRAND AVE DES MOINES, IA 50316	POSTCARDS, PRINTING	222.60
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1013.07

**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.6(3)(i).)