

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FILED
DISCLOSED

Johnson

FORM DR-2 Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>17234</u>
Logged In	<u>DM</u>
Scanned	
Computer	<u>DM</u>
Audited	

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

NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS COMMITTEE

IMPORTANT: Indicate by # type of committee you are reporting for: 5 FILED PM-1-10-05

(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 TERRENCE NEUZIL Political Party (if applicable) DEMOCRAT

Office Sought SUPERVISOR District (if Senate or House) _____

Late reports are subject to possible civil and criminal penalties.

Terrence A. Neuzil 319-338-3482 1-3-05
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A JANUARY 19 REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR.
 (report date) Indicate by # 2

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
Nov. 2, 2004

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. (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.)\$ 1649.57

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 360.00

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\$ 2009.57

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 1781.89

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)\$ 227.68

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

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)\$ 150.00

****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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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)
 NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS 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
10/15/04	ID# CK#	LORIE LEO 3510 CUMBERLAND RIDGE RD. NORTH LIBERTY, IA 52317		\$ 50	<input type="checkbox"/>
10/15/04	ID# CK#	CHARLES MILLER 312 S. FIRST AVE IOWA CITY, IA 52245		100	<input type="checkbox"/>
10/20/04	ID# CK#	UNITEMIZED CONTRIBUTIONS \$25 AND UNDER FROM 10/20/04 DEPOSIT RECEIVED 10-15-04 TO 10-19-04.		85	<input type="checkbox"/>
10/29/04	ID# CK#	JIM STOCKMAN 4836 OAKCREST HILL RD. SE IOWA CITY, IA 52240		100	<input type="checkbox"/>
11/1/04	ID# CK#	UNITEMIZED CONTRIBUTIONS \$25 AND UNDER FROM 11/1/04 DEPOSIT. RECEIVED ON 10/26/04		25	<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				\$ 360	
TOTAL (if last page of this schedule)				\$ 360	

* 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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Reset Form

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)
 NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS COMMITTEE

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
10-16-04 CK# 1147	ID# CK#	SOLON ECONOMIST 102 N. MARKET SOLON, IA 52333	ADS	\$ 202 ⁰⁰
10-18-04 CK# 1148	ID# CK#	GAZETTE COMMUNICATIONS 1801 2 ND ST. STE 100 CORALVILLE, IA 52241	ADS	407 ³⁵
10-18-04 CK# 1149	ID# CK#	LONE TREE REPORTER P.O. BOX 235 LONE TREE, IA 52755	ADS	100 ⁰⁰
10-18-04 CK# 1150	ID# CK#	KCJJ RADIO P.O. BOX 2118 IOWA CITY, IA 52244	ADS	250 ⁰⁰
10-18-04 CK# 1151	ID# CK#	POSTMASTER 400 S. CLINTON ST. IOWA CITY, IA 52240	POSTCARD STAMPS FOR MAILING	46 ⁸³
10-26-04 CK# 1152	ID# CK#	IOWA CITY PRESS CITIZEN 1725 N. DODGE ST. IOWA CITY, IA 52245	ADS	616 ¹⁹
10-28-04 CK# 1153	ID# CK#	KXIC RADIO 3365 NE DUBUQUE ST. IOWA CITY, IA 52240	ADS	120 ⁰⁰
11-3-04 CK# 1154	ID# CK#	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245	REIMBURSEMENT FOR BALLOONS, SAND WEIGHT, CAKE, PLATES, FORKS, FOOD FOR VOLUNTEERS	39 ⁵²
SUB-TOTAL				\$ 1781.89
TOTAL (if last page of this schedule)				\$ 1781.89

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).)

