

DISCLOSURE SUMMARY PAGE

Reset Form

Johnson

FORM DR-2 (Rev. 01/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>17478</u>	
Indexed <u>SW</u>	
Audited _____	
Computer _____	

COMMITTEE NAME (Must be same as on Statement of Organization)
Joannes Pool for Supervisor Committee

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 <u>Joannes Pool</u>	Political Party <u>Green</u>
Office Sought <u>County Supervisor (Johnson)</u>	District (if Senate or House) _____

David A Reed
SIGNATURE OF TREASURER (or person filing this report)

(319)354-3081
TELEPHONE

Jan. 15, 2003
DATE SIGNED

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

JAN 17 2003

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A January 19, 2003 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 <u>November 5, 2002</u>
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. (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.)	\$ <u>393.68</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>295.00</u>
Schedule F: Loans Received total (Attach Schedule F)	_____
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	_____
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ <u>688.68</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	<u>688.68</u>
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)	\$ <u>0</u>

****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) \$ _____

For Instructions, See Back of Form



CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Joannes Pool for Supervisor 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
10/22/02	ID# CK#	Meredith P. Gooding 2890 Coral Ct., Apt. 302 Iowa City, IA 52241		\$ 15.00	
10/22/02	ID# CK#	Shannon L. Owens-Silva 753 w. Benton, #9 Iowa City, IA 52246		10.00	
10/29/02	ID# CK#	Alan Ahtner 1413 Franklin Iowa City, IA 52240		25.00	
10/29/02	ID# CK#	Don Arenz 711 N. Gilbert Iowa City, IA 52245		25.00	
10/29/02	ID# CK#	James Moxley 4383 River Bend Rd. Iowa City, IA 52240		15.00	
11/7/02	ID# CK#	David Reed 717 Dearborn St. Iowa City, IA 52240		25.00	
11/18/02	ID# CK#	Citizens for a New Secretary of Agriculture 701 N. C Street, #3110 Indianola, IA 50125		180.00	
	ID# CK#	(Above was payment for campaign brochures provided to the Secretary of Agriculture campaign by the Joannes Pool for Supervisor Committee)			
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$ 295.00

TOTAL (if last page of this schedule)

\$ 295.00

* 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) (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.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)
 Joannes Pool for Supervisor 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
10/29/02	ID# CK# 1002	University of Iowa Copy Center Iowa Memorial Union Iowa City, IA 52242	Copies of campaign brochure	\$ 335.69
11/14/02	ID# CK# 1005	Robinson/Hart Green Committee P. O. box 734 Baxter, Ia 50028	Agreed upon share of contributions at fundraiser on 9/30/02 (1/2 of 297.75 - 10.75)	143.50
11/17/02	ID# CK# 1006	Joannes Pool 802 E. Washington Iowa City, IA 52240	Reimbursement for copies of campaign brochure	109.20
11/22/02	ID# CK# 1007	Zephyr copies 124 e. Washington Iowa ity, IA 52240	Copies of campaign brochure & fundraising letter - originally billed to Johnson Co. Green Central Committee	52.16
9/28/02	ID# CK#	University of Iowa Credit Union 500 Iowa Avenue Iowa City, IA 52240	Costs of checks for checking account	4.60
01/11/03	ID# CK# Cashiers ch	Johnson County Green Central Committee, P. O. Box 2448, Iowa City, IA 52244	Transfer of remaining funds from 2002 campaign	43.53
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 688.68
TOTAL (if last page of this schedule)				\$ 688.68

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 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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COMMITTEE NAME (Must be same as on Statement of Organization)
Joannes Pool for Supervisor Committee

* Check numbers were in error on original form 10/19/02

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
10/03/02	ID# CK# 1001	Holly Hart 521 Bowery, #4 Iowa City, IA 52240	Reimbursement for cost of voter list from Johnson County Auditor's office	\$ 10.17
10/8/02	ID# CK# 1001	Holly Hart 521 Bowery, #4 Iowa City, IA 52240	Reimbursement for postage to mail fundraising letters	93.88
9/24/02	ID# CK# 1003	Joannes Pool 802 E. Washington Iowa City, IA 52240	Reimbursement for copies of fundraising letter	18.90
9/28/02	ID# CK# 1003	Joannes Pool 802 E. Washington Iowa City, IA 52240	Reimbursement for supplies for supplies for making campaign signs: paint & poster board	28.32
10/02/02	ID# CK# 1003	Joannes Pool 802 E. Washington Iowa City, IA 52240	Reimbursement for copies of campaign brochure	50.40
10/16/02	ID# CK# 1004	Joannes Pool 802 E. Washington Iowa City, IA 52240	Reimbursement for copies of campaign brochure	260.40
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 462.07
TOTAL (if last page of this schedule)				\$ 462.07

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(for Schedule B)