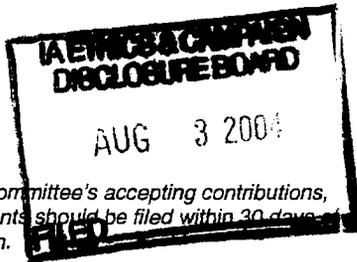


FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

- This is an **initial*** Statement of Organization
 This is an **amended*** Statement of Organization

**An initial Statement of Organization should be filled within 10 days of the committee's accepting contributions, making expenditures or incurring indebtedness exceeding \$750. Amendments should be filed within 30 days of change. Penalties may be imposed for late-filed Statements of Organization.*



| | |
|------------------------------|---|
| FORM DR-1 (Rev. 05/02) | STATEMENT OF ORGANIZATION <i>Johnson</i> |
| For Office Use Only | |
| Comm. # <u>21265</u> | |
| Indexed <u>sh</u> | |
| Audited _____ | |
| Computer <u>sh</u> | |

COMMITTEE NAME (Required by law)
Citizens for Public Power

IMPORTANT: Indicate type of committee you are reporting for: 6
 (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 (list candidates under purpose of committee)

COMMITTEE TREASURER (Required by law) *This address used for all reminders and correspondence*
COMMITTEE CHAIR (List additional officers on separate page)

Name LaVonn Horton
 Mailing Address P.O. Box 252
 City, State Zip Code Iowa City, IA 52244-0252
 Phone (319) 339-0331
 e-Mail cohorts451@abccemail.net

Name Carol Spaziani/Saul Mekies, co-chairs
 Mailing Address 405 Crestview Ave
 City, State Zip Code Iowa City, IA 52245
 Phone (319) 338-6140
 e-Mail spazianic@msn.com

INDICATE PURPOSE OF COMMITTEE - Check One Box Advocate for/against candidate(s) Advocate for/against ballot issue(s)
 Comment or description: In favor of municipalization of electric power in Iowa City, IA

All Candidates Enter: Office Sought: _____ District: _____
 Political Party (if applicable): _____ Year Standing for Election: _____
County/Local Candidates and Local Ballot/Franchise Committees Enter: County: Johnson Date of Election: November 8, 2005

Bank Account Name ↓ ↓ Citizens for Public Power
 Name of Financial Institution/type of Account ↓ ↓ Iowa State Bank & Trust Company/cking
 Mailing Address ↓ ↓ PO Box 1700
 City ↓ ↓ State ↓ ↓ Zip ↓ ↓ Iowa City Iowa 52244-1700

Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor
 ↓ ↓
 Mailing Address ↓ ↓
 City ↓ ↓ State ↓ ↓ Zip ↓ ↓
 Phone () _____
 e-Mail _____

DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION
 Indicate disposition of funds by marking appropriate number in box: 3
 (Statement of intent required by law for all committees, except state parties and central committees and committees using only personal funds.)

- | | |
|--|--|
| (1) DONATED TO _____ COUNTY CENTRAL COMMITTEE | (6) PRORATED REFUND TO CONTRIBUTORS |
| (2) DONATED TO _____ LOCAL/STATE/NAT'L POLITICAL PARTY (underline one) | (7) TRANSFER TO ANOTHER COMMITTEE OF THIS SAME CANDIDATE (CANDIDATES ONLY) |
| <u>(3) DONATED TO CHARITABLE ORGANIZATION</u> (specify) <u>Iowa Association of Municipal Utilities</u> <u>Ankang, Iowa</u> | (8) RETURN TO PARENT ENTITY GENERAL FUND (PACS ONLY) |
| (4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND (underline one) | (9) OTHER (PACs ONLY), PLEASE BE SPECIFIC |
| (5) PARTISAN CONGRESSIONAL DISTRICT FUND | |

STATEMENT OF AFFIRMATION BY TREASURER AND CANDIDATE; OR POLITICAL COMMITTEES, BY CHAIRPERSON
 I am aware that I am required to file disclosure reports if the committee receives contributions, makes expenditures, or incurs indebtedness in excess of 750.00 in a calendar year to expressly advocate for any candidate or ballot issue. I understand that although the treasurer normally prepares and files reports, the candidate or chairperson (PACs) is responsible under the law for accurate and timely disclosure reports and that late-filed reports are subject to civil penalties and possible other legal action. I understand that by filing this form, I am subject to the laws found in Iowa Code chapter 56, chapter 68B and administrative rules found in chapter 351. I affirm that all committee officers have been informed of their appointment and obligations.

LaVonn Horton
 Signature of Treasurer
Carol Spaziani
 Signature of Candidate, OR, if PAC, Central Committee or Local Ballot Issue, Chairperson

July 30, 2004
 Date Signed
July 30, 2004
 Date Signed