

FOR INSTRUCTIONS, SEE BACK OF FORM  
This form is not applicable to statutory political committees.

## Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

FORM	(Rev. 02/96)
<b>DR-3</b> NOTICE OF DISSOLUTION	
<b>For Office Use Only</b>	
Comm. #	_____
Indexed	_____
Audited	_____
Computer	_____
Certified Date of Dissolution	_____

SEP 23 2003

### COMMITTEE NAME

Official Name of Committee	
<u>The Committee to Reelect Matt Goodlaxson</u>	
Street	
<u>1109 5th Avenue</u>	
City, State, Zip Code	
<u>Iowa City Iowa 52240</u>	
Area Code	Telephone
<u>(319) 354-0467</u>	

Effective date of dissolution:

9/22 \_\_\_\_\_, 2003

*Julie Goodlaxson*  
Signature of Treasurer

9/22/03  
Date Signed

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

*[Signature]*  
Signature of Candidate - Required for Candidate's Committee

9-22-03  
Date signed

### WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.