

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 \$500. Amendments should be filed within 30 days of a change. Penalties may be imposed for latefiled Statements of Organization.

Jones

FORM DR-1 (Rev. 07/00)	STATEMENT OF ORGANIZATION
For Office Use Only	
Comm. # <u>1724-A</u>	Indexed _____
Submitted _____	Computer _____

FILED

02 APR - 8 2002

JONES COUNTY IOWA

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
 APR 18 2002
 FILED

COMMITTEE NAME (Required by law)
STREEPER FOR SUPERVISOR

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 (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)

<p>Name: <u>THERESE STREEPER</u></p> <p>Mailing Address: <u>13356 HWY 136</u></p> <p>City, State, Zip Code: <u>OSLOW, IA 52321</u></p> <p>Phone (563): <u>485-3447</u></p> <p>e-Mail: _____</p>	<p>Name: <u>MICHAEL STREEPER</u></p> <p>Mailing Address: <u>P.O. Box 43</u></p> <p>City, State, Zip Code: <u>OSLOW, IA 52321</u></p> <p>Phone (563): <u>485-1993</u></p> <p>e-Mail: _____</p>
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INDICATE PURPOSE OF COMMITTEE- Check One Box Advocate for/against candidate(s) Advocate for/against ballot issue(s)
 Comment or description: _____

All Candidates Enter: Office Sought: SUPERVISOR District: 3

Political Party (if applicable): REPUBLICAN Year Standing for Election: 2002

County/Local Candidates and Local Ballot/Franchise Committees Enter: County: JONES Date of Election: 06-04-02

<p>Bank Account Name ↓ ↓ <u>STREEPER FOR SUPERVISOR</u></p> <p>Name of Financial Institution/type of Account ↓ ↓ <u>SECURITY STATE BANK - Checking</u></p> <p>Mailing Address ↓ ↓ <u>P.O. Box 39</u></p> <p>City ↓ ↓ State ↓ ↓ Zip ↓ ↓ <u>CASCADE IA 52033</u></p>	<p>Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor ↓ ↓ <u>MICHAEL STREEPER</u></p> <p>Mailing Address ↓ ↓ <u>Box 43</u></p> <p>City ↓ ↓ State ↓ ↓ Zip ↓ ↓ <u>OSLOW IA 52321</u></p> <p>Phone (563) <u>485 1993</u></p> <p>e-Mail: _____</p>
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DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION
 Indicate disposition of funds by marking appropriate number in box: (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)

(3) DONATED TO CHARITABLE ORGANIZATION (specify) OSLOW FIRE DEPARTMENT (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 \$500.00 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 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.

Theresa Streep
 Signature of Treasurer

Michael Streep
 Signature of Candidate, OR, if PAC, Central Committee or Local Ballot Issue, Chairperson

4-08-02
 Date Signed

4-08-02
 Date Signed