FOR INSTRUCTIONS, SEE BACK OF FORM MAY 12 2004

Reset Form

CHECK ONE:

[X] This is an **initial*** Statement of Organization

[ ] This is an **amended*** Statement of Organization

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

FORM DR-1 (Rev 07/2003)	STATEMENT OF ORGANIZATION

For Office Use Only

Comm. # 17647

Indexed

Audited

Computer

COMMITTEE NAME

Waller for Auditor Committee

4

IMPORTANT: Indicate type of committee you are reporting for:
(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

COMMITTEE TREASURER (mandatory for all committees)

Name: Sharon Lallier Waller

Mailing Address: 1409 E. Linden St.

City, State: Algona, IA Zip Code: 50511

Phone: (515-295-6922

e-Mail:

COMMITTEE CHAIR (mandatory except for a candidate's committee)

Name: Delores Lallier

Mailing Address: 314 N. McCoy St.

City, State: Algona IA Zip Code: 50511

Phone: (515-295-2631

e-Mail:

INDICATE PURPOSE OF COMMITTEE – Check One Box [X] Advocate for/against candidate(s) [ ] Advocate for/against ballot issue(s)

Comment or description:

All Candidates Enter:

Office Sought: Kossuth County Auditor

District:

Political Party (if applicable): Democrat

Year Standing for Election: 2004

County/Local Candidates and Local Ballot/Franchise Committees Enter:

County: Kossuth

Date of Election:

Bank Account Name: Sharon Waller Campaign Fund

Name of Financial Institution/type of Account: Northwest Federal Savings BK

Mailing Address: 1409 E. Linden St.

City: Algona State: IA Zip: 50511

Candidate name & Address, or Parent Entity (PACs, if applicable), Affiliate, or Sponsor: Sharon Lallier Waller

Mailing Address: 1409 E Linden

City: Algona State: IA Zip: 50511

Phone: (515-295-6922

e-Mail:

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

1. The committee and all persons connected with the committee understand that they are subject to the laws in Iowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the Iowa Administrative Code.

2. That Iowa Code section 68A.402 and rule 351--4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.

3. That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule.

4. That Iowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.

5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.301 through 68A.303 and rule 351—4.25.

6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed.

Sharon Lallier Waller — Signature of Treasurer — Date Signed: 5-12-04

Sharon Lallier Waller — Signature of Candidate, OR, for all other committees, Chairperson — Date Signed: 5-12-04