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LEE

FOR INSTRUCTIONS, SEE BACK OF FORM

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DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	17519
Logged In	
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Audit	

ETHICS & CAMPAIGN DISCLOSURE BOARD

MAY 20 2004

FILED 5/18/04

DATE SIGNED

COMMITTEE NAME (Must be same as on Statement of Organization)
Hunold for Sheriff.com

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 David E Hunold Political Party Republican
 Office Sought Lee County Sheriff District (if Senate or House) _____

David E Hunold
 SIGNATURE OF TREASURER (or person filing this report)

524-4936
 TELEPHONE

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

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A MAY 19 REPORT FOR AN/A (1) ELECTION/(2) NON-ELECTION YEAR.

Indicate one

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
Nov 2, 2004
 County & Local Committees, enter County in which Election is held
Lee County

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>978⁶⁷</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>3251⁷⁵</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>169⁹³</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>-0-</u>
(Schedule H applies to Candidates' Committees Only)		
	SUB-TOTAL	\$
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>2030⁵²</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>-0-</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>2369⁸³</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>-0-</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>155⁰⁰</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>-0-</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input type="checkbox"/> YES <input type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>-0-</u>

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Hunold for Sheriff 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
01/14/04	ID# CK# 3850	Norma Dahms 33 Westwood Court Donnellson IA		\$ 100 ⁰⁰	<input type="checkbox"/>
01/22/04	ID# CK# 9743	Thomas Crew 3493 265th Ave Keokuk IA 52632		100 ⁰⁰	<input type="checkbox"/>
01/19/04	ID# CK# 6687	Cheryl Hardin 2416 Ave J Ft. Madison IA 52627		50 ⁰⁰	<input type="checkbox"/>
01/06/04	ID# CK# 8993	Keith Boecker 1379 Croton Rd Farmington IA 52626		10 ⁰⁰	<input type="checkbox"/>
01/12/04	ID# CK# <i>GL</i>	unitemized contributions		80 ⁰⁰	<input type="checkbox"/>
01/19/04	ID# CK# 6688	Cheryl Hardin 2416 Ave J Ft. Madison IA 52627		25 ⁰⁰	<input type="checkbox"/>
01/09/04	ID# CK#	Unitemized Contributions		105 ⁰⁰	<input type="checkbox"/>
01/16/04	ID# CK#	Unitemized Contributions		30 ⁰⁰	<input type="checkbox"/>
02/09/04	ID# CK#	Michael McMahon 300 East 2nd St Muscatine IA 52761		100 ⁰⁰	<input type="checkbox"/>
02/10/04	ID# CK#	Unitemized Contributions		80 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 680 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

* 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). 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 A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Harold for Sheriff 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.

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02/17/04	ID# CK#	Unitemized Contribution		\$ 20 ⁰⁰	<input type="checkbox"/>
03/04/04	ID# CK#	Unitemized Contributions		93 ⁰⁰	<input type="checkbox"/>
03/16/04	ID# CK#	Harold Campbell 12R1 Wayland, MO 63472		100 ⁰⁰	<input type="checkbox"/>
03/16/04	ID# CK#	Unitemized contributions		8 ⁰⁰	<input type="checkbox"/>
04/06/04	ID# CK#	Unitemized Contributions		80 ⁰⁰	<input type="checkbox"/>
04/19/04	ID# CK# 5722	Mitchell Harold PO Box 280 Dannellson IA 52625		100 ⁰⁰	<input type="checkbox"/>
04/19/04	ID# CK#	Unitemized Contributions		50 ⁰⁰	<input type="checkbox"/>
04/19/04	ID# CK#	Keith Boecker 1379 Croton Rd Farmington IA 52626		20 ⁰⁰	<input type="checkbox"/>
05/02/04	ID# CK# 3597	Kenneth Hamilton 1416 Timea St Keokuk IA 52632		100 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK# 1124	Melody Slater 110 cherry St Montrose IA 52639		25 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 596 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Hunobler Sheriff's 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.

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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
05/02/04	ID# CK# 4475	Barbara Bentler 1492 155th Ave Donnellson, IA 52625	Aunt	\$ 100 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK# 606	Larry Brown 2381 Peach Orchard Rd Montrose IA 52639		100 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK#	Curtis Glascock 2152 Johnson St Rd Keokuk, IA		50 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK# 1084	David Washburn 35 Bluff Rd Montrose IA 52639		100 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK# 3205	Joseph Bentler 1646 160th ST Donnellson IA 52625		25 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK# 4047	Vic Kruse 1761 110th ST Salem, IA 52649		50 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK# 10012	HAL MYERS 1328 ACM DR ST PAUL, IA 52657		30 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK# 4316	Donald Lucas 300 S AVE H Ft. Madison, IA 52627		30 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK#	Leon Ewart Main St Rd Keokuk IA 52632		50 ⁰⁰	<input checked="" type="checkbox"/>
05/02/04	ID# CK#	Kim Maxwell 2097 White Plains Rd Argyle, IA 52619		50 ⁰⁰	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 585 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Hunold for Sheriff 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.

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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
<i>05/02/04</i>	ID# CK#	<i>Unitemized Contributions</i>		<i>\$ 1390⁷⁵</i>	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				<i>\$ 1390⁷⁵</i>	
TOTAL (if last page of this schedule)				<i>\$ 3251⁷⁵</i>	

* 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). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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CHECK THIS BOX IF AMENDING FORM

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)

Hunold for Sheriff 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
01/05/04	ID# CK# N/A counter check	Tammy Paven RRI Alexandria, MO 63430	Advertising - hats	\$ 312 ⁰⁰
02/12/04	ID# CK# N/A counter check	Howard Carter 2413 Belknap Blvd Keokuk, IA 52632	Advertising - Buttons	48 ¹⁵
02/12/04	ID# CK# N/A counter check	Shirt Shack 288 East Main Kahoka mo 63445	Advertising - hats	338 ⁸²
03/04/04	ID# CK# N/A counter check	Hill Printing 111 N 5th Keokuk IA 52632	Advertising - Print - Internet website	200 ⁰⁰
03/26/04	ID# CK# N/A counter check	Betty Havens 332 W Chase Macomb, IL 61455	Advertising - hats	240 ⁰⁰
04/19/04	ID# CK# CASH	Shelly Lipper Rt 1 Luray, MO 63445	Advertising hats	138 ⁰⁰
4/27/04	ID# CK# CASH	Homestore 320 Des Moines Keokuk IA 52632	Sign Materials	31 ⁹³
4/28/04	ID# CK# N/A counter check	Bonny Buyer West Point IA 52686	Print Advertising	350 ⁴⁰
SUB-TOTAL				\$ 1659 ³⁰
TOTAL (if last page of this schedule)				\$

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 68A.6(3)(f).)

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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)
Hunold for Sheriff 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
04/28/04	ID# CK# N/A <i>counter check</i>	Building Materials Fort Madison, IA	Sign Materials	\$ 98 ⁷⁴
04/28/04	ID# CK# 1001	Dollar General Keokuk IA 52632	Fundraiser materials	28 ³⁶
04/28/04	ID# CK# 1002	Aldi's - CASH - <i>Nancy Riddle</i> Keokuk, IA 52632	Food products - Fundraiser	20 ⁰⁰
04/28/04	ID# CK# 1003	County Market Keokuk, IA 52632	Food products - Fundraiser	13 ⁶⁰
05/02/04	ID# CK# 1004	Thomas Bent Backyard karaoke Hamilton, IL	Entertainment - Fundraiser	200 ⁰⁰
01/30/04	ID# CK#	KSB Bank Keokuk	Account Chg	2 ²²
02/29/04	ID# CK#	KSB Bank Keokuk	Account Chg	28 ¹
03/31/04	ID# CK#	KSB Bank Keokuk	Account Chg	26 ³
SUB-TOTAL				\$ 368 ⁷⁶
TOTAL (if last page of this schedule)				\$ 368⁷⁶

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 68A.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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)
Hunold for Sheriff 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
<i>04/30/04</i>	ID# CK#	<i>KSB Bank Keokuk IA</i>	<i>Account Chg</i>	<i>\$ 2⁸⁶</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 2⁸⁶</i>
TOTAL (if last page of this schedule)				<i>\$ 2030⁵²</i>

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 68A.6(3)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Hunold for Sheriff committee

Reset Form

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
04/28/04	D+D Trailers 3341 245th Ave Keokuk, IA 52632		COAT FOR FUNDRAISER	\$ 80 ⁰⁰	<input checked="" type="checkbox"/>
04/28/04	Gary Davis 608 9th ST Mt. Madison IA 52627		Knife for Fundraiser	75 ⁰⁰	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 155⁰⁰

TOTAL (if last page of this schedule) \$ 155⁰⁰

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.

Reset Form

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Hunold for Sheriff committee

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ - 0 -

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
04/19/04	David Hunold Keokuk IA		\$ 138 ⁰⁰
04/27/04	David Hunold Keokuk, IA		\$ 31 ⁹³

TOTAL (PART I) \$ 169⁹³

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II) \$ - 0 -
 From Schedule E -- TOTAL LOANS FORGIVEN \$ - 0 -
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 169⁹³

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