

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003)	Lee DISCLOSURE REPORT
For Office Use Only	
Comm. #	17519
Logged In	DM
Scanned	
Computer	DM
Audited	

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

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 State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name	Political Party
DAVID E HUNOLD	Republican
Office Sought	District (if Senate or House)
Lee County Sheriff	

IAEIBOS CAMPAIGN
DISCLOSURE BOARD
JAN 24 2005
FILED 01/19/05
DATE SIGNED

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

(319) 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 1/19/05 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date)

Indicate one 1

CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

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.)

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.)	\$	1,098 ⁴²
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		935 ¹⁸
Schedule F: Loans Received total (Attach Schedule F)		4,000 ⁰⁰
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		-0-
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	5,933 ⁶⁰
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		5,293 ³⁵
Schedule F: Loan Repayments total (Attach Schedule F)		640 ²⁵
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	-0-
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	-0-
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	4,869 ⁷⁵
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	-0-
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)	\$	

For Instructions, See Back of Form

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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
10/23/04	ID# CK#	J.R. Fuller 2708 340th ST Keokuk, IA		\$ 50 ⁰⁰	<input type="checkbox"/>
10/25/04	ID# CK#	Chuck Nallinger 105 South 2nd Montrose IA		50 ⁰⁰	<input type="checkbox"/>
10/27/04	ID# CK#	Tim Hull 2655 Hwy 2 Ft. Madison IA		100 ⁰⁰	<input type="checkbox"/>
10/27/04	ID# CK#	William Dahms 33 Westwood CT Donnellson, IA		100 ⁰⁰	<input type="checkbox"/>
11/01/04	ID# CK#	Harold Hunold Kochler Lane Montrose, IA	Father	100 ⁰⁰	<input type="checkbox"/>
10/26/04	ID# CK#	Unitemized Cash		435 ¹⁸	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 835 ¹⁸	
TOTAL (if last page of this schedule)				\$ 835 ¹⁸	

* 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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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
10/15/04	ID# CK# 1028	WQKQ FM 2850 MT PLEASANT ST Burlington, IA	Radio Advertising	\$ 681 ⁰⁰
10/15/04	ID# CK# 1029	Daily Gate City 1016 Main St Keokuk, IA	Newspaper Advertising	176 ⁴⁰
10/16/04	ID# CK# 1030	Hy Vee Food Store 3111 Main St Keokuk, IA	Postage	148 ⁰⁰
10/19/04	ID# CK# 1031	Clear Channel Radio 1411 N Roosevelt Ave Burlington, IA	Radio Advertising	525 ⁰⁰
10/20/04	ID# CK# 1032	Papa Chico's Keokuk, IA	Food for Fundraiser	67 ⁰⁰
10/21/04	ID# CK# 1033	Daily Gate City 1016 Main St Keokuk, IA	Newspaper Advertising	263 ⁴⁰
10/21/04	ID# CK# 1034	KOKX 108 Washington St Keokuk, IA	Radio Advertising	744 ⁰⁰
10/23/04	ID# CK# 1035	Hy Vee 3111 Main St Keokuk, IA	Food for Fundraiser	38 ⁵⁵
SUB-TOTAL				\$ 2,643 ³⁵
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)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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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
11/12/04	ID# CK#	KSB Bank 401 Main Keokuk IA	check Acct Service Chg	\$ 32.99
11/23/04	ID# CK# -	David Hunold 2493 310th ST Keokuk, IA	Repay outstanding indebtedness	2,646.71
	ID# CK#			
SUB-TOTAL				\$ 2,650.00
TOTAL (if last page of this schedule)				\$ 5,293.35

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

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

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

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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
10/18/04	Karl Judd 22 Cedar Court Monroe, IA		Radio Advertising	\$ 1,180 ⁰⁰	<input type="checkbox"/>
10/19/04	Dale Hagmeier 3609 235 th Ave Keokuk, IA		Custom Knife	180 ⁰⁰	<input checked="" type="checkbox"/>
10/25/04	Rick Bryant 629 main St Keokuk, IA		Paper Advertising	150 ⁰⁰	<input type="checkbox"/>
11/23/04	David Hunold 2493 340 th ST Keokuk, IA		Forgive Loan	3359 ⁷⁵	<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				\$	4869 ⁷⁵
TOTAL (if last page of this schedule)				\$	4869 ⁷⁵

*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.

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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
10/19/04	David Hunold 2493 340 th ST Keokuk, IA	CANDIDATE	\$ 4,000 ⁰⁰

TOTAL (PART I) \$ 4000⁰⁰

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
11/23/04	David Hunold 2493 340 th ST Keokuk, IA	CANDIDATE	\$ 640 ²⁵

TOTAL CASH REPAYMENTS (PART II) \$ 640²⁵
From Schedule E - TOTAL LOANS FORGIVEN \$ 3359⁷⁵
TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ -0-

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