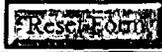


Linn

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



| | |
|---------------------------------------|----------------------|
| FORM DR-2 (Rev. 07/2003) | DISCLOSURE REPORT |
| For Office Use Only | |
| Comm. # | <u>17571</u> |
| Logged In | _____ |
| Scanned | _____ |
| Computer | _____ |
| Audited | _____ |

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

Rozinek for Supervisor

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

CANDIDATE COMMITTEES ONLY:

| | |
|------------------------------------------------|------------------------------------|
| Candidate Name <u>Bernita D. Rozinek</u> | Political Party <u>Democrat</u> |
| Office Sought <u>Linn County Supervisor</u> | District (if Senate or House) |

Bernita D. Rozinek
SIGNATURE OF TREASURER (or person filing this report)

319-848-4598
TELEPHONE

JUL 16 2004
07/16/04
DATE SIGNED

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

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A July 19, 2004 REPORT FOR AN/A (1) ELECTION ((2)NON-ELECTION YEAR.
(report date) 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 |
| County & Local Committees, enter County in which Election is held <u>Linn</u> |

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>344.22</u> |
| ADD TOTAL MONEY TAKEN IN THIS PERIOD | | |
| Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) | | <u>600.00</u> |
| Schedule F: Loans Received total (Attach Schedule F) | | <u>0</u> |
| Schedule H: Total Sales of Campaign Property (Attach Schedule H) | | <u>0</u> |
| <u>(Schedule H applies to Candidates' Committees Only)</u> | | |
| SUB-TOTAL | \$ | <u>944.22</u> |
| SUBTRACT TOTAL MONEY SPENT THIS PERIOD | | |
| Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) | | <u>926.23</u> |
| Schedule F: Loan Repayments total (Attach Schedule F) | | <u>17.99</u> |
| CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) | \$ | <u>0</u> |
| **UNPAID BILLS (From Schedule D - Attach Schedule D) | \$ | <u>0</u> |
| **IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) | \$ | <u>1045.75</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 checked="" type="checkbox"/> NO |
| VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) | \$ | <u>0</u> |

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN
(Including candidate's personal funds)

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

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

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 |
|--------------------------|----------------------------------------------------|-------------------------------------------------------------|--------------------------------------------|-----------------|-----------------------------|
| 05/23/04 | ID# CK# | Josephine Rozinek 6399 Old River Rd. Ely, Iowa 52227 | mother-in-law | \$200.00 | <input type="checkbox"/> |
| 05/25/04 | ID# CK# | Janet D. Henderson 6551 Old River Rd. Ely, Iowa 52227 | | 200.00 | <input type="checkbox"/> |
| 05/27/04 | ID# CK# | Mark T. Mentzer 5504 Old River Rd Ely, Iowa 52227 | | 100.00 | <input type="checkbox"/> |
| 05/31/04 | ID# CK# | Edward Rozinek 6414 Old River Rd. Ely, Iowa 52227 | Brother-in-law | 100.00 | <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 \$600.00
TOTAL (if last page of this schedule) \$100.00

* 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

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)
Rozinek for Supervisor

| 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 |
|---------------------------------------|----------------------------------------------------------|--------------------------------------------------------------|----------------------------------------|-----------------|
| 05/29/04 | ID# CK# | Walmart 3601 29th Ave. SW Cedar Rapids, IA 52404 | paint & masking tape for signs | \$ 16.99 |
| 05/29/04 | ID# CK# | Menards 2800 Wiley Blvd. SW Cedar Rapids, IA 52404 | Stakes, paint, & stencils for signs | 10.12 |
| 05/31/04 | ID# CK# | Guaranty Bank 302-3rd Ave. SE Cedar Rapids, IA 52401 | Account handling | 5.44 |
| 06/01/04 | ID# CK# | KMR Y 1957 Blairs Ferry Rd. NE Cedar Rapids, IA 52402 | Radio advertising | 289.50 |
| 06/01/04 | ID# CK# | Marion Times 806-6th St. Marion, IA 52302 | Newspaper Ad | 98.00 |
| 06/03/04 | ID# CK# | The Gazette 500-32d. Ave. SE Cedar Rapids, IA 52406 | Newspaper Ads | 255.52 |
| 06/03/04 | ID# CK# | Menards 2800 Wiley Blvd. SW Cedar Rapids, IA 52404 | Stakes for signs | 4.60 |
| 06/30/04 | ID# CK# | Guaranty Bank 302-3rd Ave. SE Cedar Rapids, IA 52401 | Account handling | 5.21 |
| SUB-TOTAL | | | | \$ 685.38 |
| 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.402(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)

Rozinek for Supervisor

| 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 |
|---------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------|-----------------------------------------------------|-----------------|
| 07/14/04 | ID# CK# | Bernita Rozinek 2314 Big Bend Rd. Ely, Iowa 52227 | Repayment for newspaper ad in Mt. Vernon/Lisbon Sun | \$ 101.25 |
| 07/14/04 | ID# CK# | Bernita Rozinek 2314 Big Bend Rd. Ely, Ia. 52227 | Repayment for newspaper Ad in The Gazette | 139.60 |
| 07/14/04 | ID# CK# | Bernita Rozinek 2314 Big Bend Rd. Ely, Ia. 52227 | partial repayment of loan | |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ 240.85 |
| TOTAL (If last page of this schedule) | | | | \$ 926.23 |

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.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1000.00

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

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 \$ |
|--------------------------|---------------------------------------------------------------------|-------------------------------------------|-------------------|
| | | | |
| | | | |
| | | | |
| | | | |

TOTAL (PART I) \$ _____

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 REPAY \$ |
|----------------------|---------------------------------------------------------------------|--------------------------------------------|-----------------|
| 07/14/04 | Bernita Rozinek 2314 Big Bend Rd. ELY, OHIO 52227 | Self | 17.99 |
| | | | |
| | | | |
| | | | |

TOTAL CASH REPAYMENTS (PART II) \$ 17.99
 From Schedule E - TOTAL LOANS FORGIVEN \$ 982.01
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0

*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 when it applies.

Page 1 of 1
 (for Schedule F)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Rozinek for Supervisor

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 |
|--------------------------|-------------------------------------------------------|---------------------------------------------|----------------------------------------|-----------------------------|-----------------------------------|
| 07/14/04 | Bernita Rozinek 2314 Big Bend Rd. ELY, IA 52222 | Self | forgiveness of debt for door knob bags | \$ 63.74 | <input type="checkbox"/> |
| 07/14/04 | Bernita Rozinek 2314 Big Bend Rd. ELY, IA 52222 | Self | forgiveness of remainder of Loan | 982.01 | <input 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 \$

TOTAL (if last page of this schedule)

\$ 1045.75

*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.