

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	9118
Logged In	JW
Scanned	
Computer	
Audited	

COMMITTEE NAME (Must be same as on Statement of Organization)
Louisiana County Republican Central Comm.

IMPORTANT: Indicate by # type of committee you are reporting for: 4
 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name: _____ Political Party (if applicable): _____
 Office Sought: _____ District (Senate or House): _____

FILED

Late reports are subject to possible civil and criminal penalties.

Sylvia Belger 319-523-2631 10-18-04
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A OCT 19, 2004 REPORT FOR (1) ELECTION //(2) NON-ELECTION YEAR.
 (report date) Indicate by # 1

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 DR-3 is filed.)

Local Committees, enter Date of Election _____

County & Local Committees, enter County in which Election is held _____

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds 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.) \$ 1257.20

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1590.00

Schedule F: Loans Received total (Attach Schedule F) _____

Schedule H: Total Sales of Campaign Property (Attach Schedule H) _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 2847.20

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 1745.46

Schedule F: Loan Repayments total (Attach Schedule F)..... _____

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3) \$ 1101.74

**UNPAID BILLS (From Schedule D - Attach Schedule D)..... \$ _____

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ _____

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)..... \$ _____

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES 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)
Rouisa Co. Cent. Comm.

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
	ID# CK#	Mary Hodges 203 404 El Ct Wapello Ia 52653		\$ 20.00	<input checked="" type="checkbox"/>
	ID# CK#	Mike Hodges Box 306 Wapello, Ia 52653		10.00	<input checked="" type="checkbox"/>
	ID# CK#	Kent Vollenheupt 401 N 2nd Wapello Ia 52653		30.00	<input checked="" type="checkbox"/>
	ID# CK#	Bill Matthews Wapello Ia 52653		60.00	<input checked="" type="checkbox"/>
	ID# CK#	Kay Smith 320 S. Main Wapello, Ia 52653		20.00	<input checked="" type="checkbox"/>
	ID# CK#	Pat Foot 413 Kennedy Dr Wapello Ia 52653		20.00	<input checked="" type="checkbox"/>
	ID# CK#	Sylvia Belong 10917 302nd St Wapello Ia 52653		75.00	<input checked="" type="checkbox"/>
	ID# CK#	David Wilson 11513 Co Rd G-62 Wapello Ia 52653		30.00	<input checked="" type="checkbox"/>
	ID# CK#	Kevin Schlett 14812 N Ave. Col Jet Ia 52738		50.00	<input checked="" type="checkbox"/>
	ID# CK#	Jack Eittle 19852 Co Rd G 40 Letts, Ia 52754		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$400.00	
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.

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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CONTRIBUTIONS – MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Louisa Co. Rep. Cent. Comm

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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	ID# CK#	<i>Ray Kepton 410 N main # 3 Wapello Ia 52653</i>		\$ 30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Nancy McGill PO Box 158 Hudson Ia 52752</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>James Carey 129 Hickory Cal Jet Ia 52738</i>		85.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Tom Sands 134 Orchard Cal Jet Ia 52738</i>		145.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Kevin Morgan 1882 T Ave Conesville, Ia 52739</i>		60.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Rita Garret 206 Flat Iron Dr Cal Jet Ia 52738</i>		50.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Terry Nelson 12917 30th Wapello, Ia 52653</i>		45.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>E. A. Hicklin 430 N 2nd Wapello Ia 52653</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Billy Prior PO Box 111 Cal Jet Ia 52738</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Ramona Wink 211 Flatiron Dr Cal Jet Ia 52738</i>		30.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 475	
TOTAL (if last page of this schedule)				\$	

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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)
Louisiana Co Rep Cent Comm

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
	ID# CK#	<i>Thomas Huston 1615 Colton St Col get Ia 52738</i>		\$ 30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Sue Zimmerman 1022 N 6th St Burlington Ia 52601</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Bob Schlutz Box 69 Col get Ia 52738</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Vicki Frank 3490 K Ave Wapella, Ia 52653</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>John Eltham 14481 100th St Wapella Ia 52653</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Carol Chatfield 24874 125th St Col get Ia 52738</i>		20.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Shirley Kemper 5974 F Ave Wapella Ia 52653</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Curt Braby 206 NE 3rd Morningsun, Ia 52640</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Pat Coill Po Box 168 Columbus City Ia 52737</i>		30.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Dev Paris 10452 83rd St Wapella Ia 52653</i>		20.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$280.00	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Roussell's Rep. Cont Comm

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
	ID# CK#	<i>Kevin Van Heiden 207 Crestwood Dr Cal Jet Dr 52738</i>		\$ 20.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Betty Koudybusch 322 Hickory Dr Cal Jet Dr 52738</i>		20.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Reanne Bagep PO Box 427 Morning Sun, Ia 52640</i>		20.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>Mark McElulley 8948 10th St. Oakville Ia 52737</i>		90.00	<input checked="" type="checkbox"/>
	ID# CK#	<i>unitemized contributions</i>		285.00	<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"/>
SUB-TOTAL				\$ 435.00	
TOTAL (if last page of this schedule)				\$ 1590.00	

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FOR INSTRUCTIONS, SEE BACK OF 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)
Louisa County Republican Central Comm.

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
8-28-04	ID# CK#	Sombrero Restaurant Grandview Iowa 52752	Food/Fundraiser	\$ 560.00
8-15-04	ID# CK#	Ken Purdy 23423 Hwy 92 Col Jct, IA 52653	Flags to give at Co. Fair	35.21
9-02-04	ID# CK#	Quinta Publishing Hwy 61 Wapello, IA 52653	Advertising	76.30
9-11-04	ID# CK#	Sands for State House 134 ORCHARD LANE COL JCT IA 52738	Contribution to Campaign	350.00
9-15-04	ID# CK#	David Wilson 11513 CO RD B-62 Wapello, IA 52653	contribution to Campaign	350.00
9-13	ID# CK#	Sylvia Belker 12917 30th Wapello, IA 52653	contribution to Campaign	350.00
9-14	ID# CK#	Sylvia Belker 12917 30th Wapello IA 52653	reimbursement for endorsing a Stamp	24.05
	ID# CK#			
SUB-TOTAL				\$ 1745.46
TOTAL (if last page of this schedule)				\$ 1745.46

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 Schedule B)