

FOR INSTRUCTIONS, SEE BACK OF FORM
This form is not applicable to statutory political committees.

Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

ETHICS & CAMPAIGN DISCLOSURE BOARD
APR 1 2003
FILED

COMMITTEE NAME

Madison

FORM	(Rev. 02/96)
DR-3 NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	<u>SD 17277</u>
Indexed	<u>SD</u>
Audited	_____
Computer	<u>pb</u>
Certified Date of Dissolution	_____

Official Name of Committee	
<u>Elect Steve Raymond for Madison County Supervisor</u>	
Street	
<u>312 S. 4th Ave.</u>	
City, State, Zip Code	
<u>Winterset, IA. 50273</u>	
Area Code	Telephone
<u>(515) 468-1768</u>	

Effective date of dissolution:

March 28, 20 03

Jeri Dambrall
Signature of Treasurer

3-28-03
Date Signed

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

Signature of Candidate - Required for Candidate's Committee

Date signed

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.