

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.

*Madison*

FORM	(Rev. 02/96)
<b>DR-3</b> NOTICE OF DISSOLUTION	
<b>For Office Use Only</b>	
Comm. #	<u>50 17277</u>
Indexed	<u>50</u>
Audited	<u>   </u>
Computer	<u>   </u>
Certified Date of Dissolution	<u>   </u>

**ETHICS & CAMPAIGN DISCLOSURE BOARD**  
**FILED**  
**APR 1 2003**

COMMITTEE NAME

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

Effective date of dissolution:

March 28, 20 03

Jeri Dambrell

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.

# DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 01/2001)	DISCLOSURE REPORT
Candidates Use Only Comm. # <u>17277</u> Indexed <u>20</u> Audited _____ Computer _____	

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

IMPORTANT: Indicate type of committee you are reporting for:  1

- ( 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

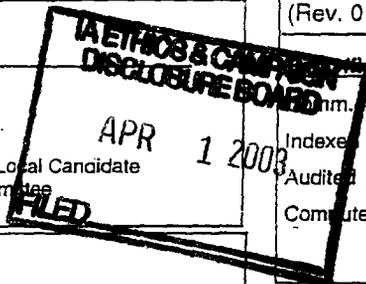
### CANDIDATE COMMITTEES ONLY:

Candidate Name Steve Raymond Political Party Republican  
 Office Sought Madison County Supervisor District (if Senate or House) \_\_\_\_\_

Jeri Mambrell  
SIGNATURE OF TREASURER (or person filing this report)

515 462-4229  
TELEPHONE

3-28-03  
DATE SIGNED



### Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

#### SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A April 19<sup>th</sup>, 2003 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.  
(report date) Indicate one  2

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.) .....\$ 37.03

#### ADD TOTAL MONEY TAKEN IN THIS PERIOD

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

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.....\$ \_\_\_\_\_

#### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

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

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) .....\$ 0.00

\*\*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) \$ \_\_\_\_\_

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	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)

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
1/13/03	ID# CK# 1021	Winterset Madisonian 112 W. Court Ave. Winterset, IA. 50273	Thank You Ad	\$ 26.00
	ID# CK# 1022	Madison County Elderly Serv. 112 W. Court Ave. 1000 N. John Wayne Dr. Winterset, IA. 50273	Donation	11.03
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 37.03

**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 56.6(3)(I).)