

Marshall

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FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Logged In _____	
Scanned <u>12-1-03</u>	
Computer _____	
Audited _____	

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

Cahill for City Council

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 John M. Cahill	<i>DEC 1 2003</i>	Political Party N/A
Office Sought City Councilmember-At-Large		District (if Senate or House) N/A

James Courance
SIGNATURE OF TREASURER (or person filing this report)

641-754-5600
TELEPHONE

12/01/03
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 12/01/2003 (first of month following election) (report date) REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.

Indicate one 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 Notice of Dissolution is filed.)

Local Committees, enter Date of Election
November 4, 2003

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

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.)	634.09
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	146.96
Schedule F: Loans Received total (Attach Schedule F)	N/A
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	N/A
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL \$	781.05
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	781.05
Schedule F: Loan Repayments total (Attach Schedule F)	N/A
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	---000.00---
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ N/A
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ N/A
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ N/A
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)	\$ N/A

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Cahill for City Council

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
10/30/03	ID# CK#	Cartor Printing 1739 East Grand Avenue Des Moines, IA 50316	Yard Signs and Sign Wires	\$ 681.05
11/26/03	ID# CK#	Froehlich Communications, Inc. P.O. Box 1265 Newton, IA 50208	Production expenses for TV spot	100.00
	ID# CK#			
SUB-TOTAL				\$ 781.05
TOTAL (If last page of this schedule)				\$ 781.05

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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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

Cahill for City Council

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
10/27/03	ID# CK#	Mary A. Foley 2005 Stratford Lane Marshalltown, IA 50158	N/A	\$50.00	<input type="checkbox"/>
10/28/03	ID# CK#	Phyllis D. Funk 2504 S. 8th St. Marshalltown, IA 50158	N/A	25.00	<input type="checkbox"/>
10/28/03	ID# CK#	Rex J. Ryden 507 Highland Drive Marshalltown, IA 50158	N/A	25.00	<input type="checkbox"/>
11/25/03	ID# CK#	Unitemized Contributions	N/A	5.00	<input type="checkbox"/>
11/25/03	ID# CK#	James L. Lowrance 1502 S. 12th St. Marshalltown, IA 50158	N/A	41.96	<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				\$ 146.96	
TOTAL (if last page of this schedule)				\$ 146.96	

* 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.

Notice of Dissolution



FORM	(Rev. 07/03)
DR-3 NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	_____
Indexed	_____
Audited	_____
Computer	_____
Certified Date of Dissolution	_____

DEC 1 2003

COMMITTEE NAME

Cahill for City Council	
Official Name of Committee	
P.O. Box 310	
Street	
Marshalltown, IA 50158	
City, State, Zip Code	
(641)	754-5600
Area Code	Telephone

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

James C. Lawrence, Treasurer

 Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

12/01/03

 Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.