

Marshall

DISCLOSURE SUMMARY PAGE

| | |
|----------------------------------|--------------------------|
| FORM DR-2 (Rev. 01/98) | DISCLOSURE REPORT |
| For Office Use Only | |
| Comm. # | <u>17600</u> |
| Indexed | _____ |
| Audited | _____ |
| Computer | _____ |

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect Joswiak Sheriff

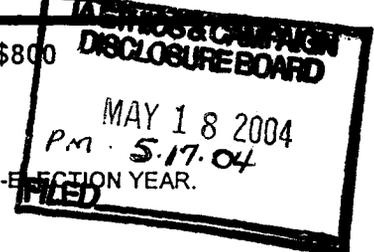
IMPORTANT: Indicate type of committee you are reporting for: 4

(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

Dale Bohende 641-754-3037
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

5-15-04
 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 May 19, 2004 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.
 (report date) 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 _____

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

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.)\$ 0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)..... 720.00

Schedule F: Loans Received total (Attach Schedule F)..... 2,500.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... -

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 3,220.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 2,587.64

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)\$ 632.36

UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 160.00

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ 383.28

OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 2,500.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ N/A

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

| | |
|--|------------------------------------|
| SCHEDULE A (Rev. 06/97) | MONETARY RECEIPTS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect Joswiak Sheriff

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 |
|--------------------------|--|---|--|-----------------|-----------------------------|
| 2-14-04 | ID# CK# 4776 | James E. Perin 216 W. Linn St Rhodes, IA 50234 | | \$ 250.00 | |
| 3-30-04 | ID# CK# Cash | Derald Gonzales 812 S 12th St Marshalltown, IA 50158 | | 50.00 | |
| 4-9-04 | ID# CK# | Bill & Sandy Ouorman 309 W Main Rhodes, IA | | 100.00 | |
| 3-30-04 | ID# CK# Cash | | | 10.00 | |
| 5-5-04 | ID# CK# 3578 | Rick Reisinger 1104 Lincoln Way Marshalltown, IA | | 625.00 | |
| 5-5-04 | ID# CK# 4794 | Paul & Connie Koehler 2002 Stratford Lane Marshalltown, IA | | 100.00 | |
| 5-5-04 | ID# CK# 2216 | Allan & Kim Smith 205 N. Center St Marshalltown, IA | | 25.00 | |
| 5-5-04 | ID# CK# 1155 | Karen Lischer & Mark Smith 816 Roberts terrace Marshalltown, IA | | 40.00 | |
| 5-5-04 | ID# CK# 7721 | William & Connie Backoff 203 W. Ferner St Marshalltown, IA | | 20.00 | |
| | ID# CK# | | | | |

SUB-TOTAL

\$ 720.00

TOTAL (if last page of this schedule)

\$ 720.00

* 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) (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.

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. 09/97) | MONETARY EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect Josniak Sheriff

| 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 |
|---------------------------------------|--|--|--|-----------------|
| 4/5/04 | ID# CK# 1 | U.S. Postal Service 309 E. Linn St Marshalltown, IA | Lock Box | \$ 34.00 |
| 4/9/04 | ID# CK# 2 | The Sign Shop 1104 W Lincoln Way Marshalltown, IA | Yard Signs | 1,150.00 |
| 4/26/04 | ID# CK# 1001 | The Vornon Company One Promotion Place Newton, IA | Bumper Stickers | 172.50 |
| 4/27/04 | ID# CK# 1002 | Secretary of Iowa Lucas Bldg 1st Floor Des Moines, IA | Current Voter Registration List for Marshall County | 45.40 |
| 5/14/04 | ID# CK# 1003 | Marshalltown Pennsylvania 507 E. Anson St Marshalltown, IA | Advertising | 314.40 |
| 5/14/04 | ID# CK# 1004 | Times-Republican 135 W. Main St Marshalltown, IA | Advertising | 407.04 |
| 5/14/04 | ID# CK# 1005 | Postmaster 309 E Linn Marshalltown, IA | Stamps | 74.00 |
| 5/14/04 | ID# CK# | Wells Fargo 666 Walnut St Des Moines, IA | Deluxe Checks | 3.50 |
| SUB-TOTAL | | | | \$ 2200.84 |
| 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 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

| | |
|---|--------------------------|
| SCHEDULE 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)
Committee to Elect Joswiak Sheriff

| 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 |
|---------------------------------------|--|--|--------------------------------|--------------------|
| <i>5/6/04</i> | ID# CK# <i>1006</i> | <i>Minute Man 101 S 1st St Marshalltown, IA</i> | <i>Brochures</i> | <i>\$ 386.80</i> |
| | ID# CK# | | | |
| SUB-TOTAL | | | | <i>\$ 386.80</i> |
| TOTAL (if last page of this schedule) | | | | <i>\$ 2,587.64</i> |

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

| | |
|--|--------------------------|
| SCHEDULE D (Rev. 08/98) | INCURRED INDEBTEDNESS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT JOSWIAK SHERIFF

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

| DATE INCURRED (MM/DD/YR) | NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED | DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED | BALANCE OWED AT CLOSE OF REPORTING PERIOD* |
|---|---|--|--|
| 05/06/04 | ENTERPRISE RECORD 130 W. MAIN STATE CENTER, IA | ADVERTISING NEWSPAPER | \$ 160 ⁰⁰ |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| SUB-TOTAL | | | \$ 160 ⁰⁰ |
| TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD | | | \$ 160.00 |

*If actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:
*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

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

COMMITTEE TO ELECT JOSWIAK SHERIFF



| | |
|--|--------------------------|
| SCHEDULE E (Rev. 06/97) | IN KIND CONTRIBUTIONS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

| DATE RECEIVED (MM/DD/YY) | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE * (if applicable) | DESCRIPTION OF IN KIND CONTRIBUTION | ESTIMATED FAIR MARKET VALUE | ✓ IF FOR FUND-RAISER CONTRIBUTION |
|---------------------------------------|--|---|-------------------------------------|-----------------------------|-----------------------------------|
| 04/12/04 | DUANE DAUIS 101 N. CENTER MARSHALLTOWN | | CANDIDATE BADGES | \$ 32.00 | <input type="checkbox"/> |
| 02/10/04 | DAVID JOSWIAK 2543 145TH ST MARSHALLTOWN, IA | CANDIDATE | COPIES STAPLES | 2.31 | <input type="checkbox"/> |
| 03/09/04 | DAVID JOSWIAK 2543 145TH ST MARSHALLTOWN, IA | CANDIDATE | CALENDAR/ PLANNER | 4.43 | <input type="checkbox"/> |
| 03/19/04 | DAVID JOSWIAK 2543 145TH ST MARSHALLTOWN, IA | CANDIDATE | COPIES COUNTY AUDITOR | 5.00 | <input type="checkbox"/> |
| 03/24/04 | DAVID JOSWIAK 2543 145TH ST MARSHALLTOWN, IA | CANDIDATE | COPIES/ STAPLES | 2.25 | <input type="checkbox"/> |
| 04/02/04 | DAVID JOSWIAK 2543 145TH ST MARSHALLTOWN, IA | CANDIDATE | COPIES/ COUNTY AUDITOR | 3.00 | <input type="checkbox"/> |
| 04/13/04 | DAVID JOSWIAK 2543 145TH ST MARSHALLTOWN, IA | CANDIDATE | PAPER/ STAPLES | 25.44 | <input type="checkbox"/> |
| 04/20/04 | DAVID JOSWIAK 2543 145TH ST MARSHALLTOWN, IA | CANDIDATE | LABELS PAPER/ STAPLES | 31.14 | <input type="checkbox"/> |
| 05/03/04 | DAVID JOSWIAK 2543 145TH ST MARSHALLTOWN, IA | CANDIDATE | P SIGN PAINT/ STRANDS | 72.55 | <input type="checkbox"/> |
| 05/03/04 | DAVID JOSWIAK 2543 145TH ST MARSHALLTOWN, IA | CANDIDATE | SIGN MATERIAL MANARDS | 110.03 | <input type="checkbox"/> |
| SUB-TOTAL | | | | \$ 288.15 | |
| TOTAL (if last page of this schedule) | | | | \$ | |

*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.

| | |
|---|--------------------------------|
| SCHEDULE F (Rev. 08/96) | LOANS RECEIVED & REPAYED |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT JOSWIAK SHERIFF

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ N/A

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.)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

| DATE RECEIVED (MM/DD/YR) | NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) | RELATIONSHIP TO CANDIDATE (If Applicable*) | AMOUNT OF LOAN |
|--------------------------|---|--|----------------|
| 04-05-04 | DAVID E. JOSWIAK 2543 145TH ST MARSHALLTOWN, IA 50158 | CANDIDATE | \$ 2,500.00 |
| | | | |
| | | | |
| | | | |

| DATE PAID (MM/DD/YR) | NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable) | RELATIONSHIP TO CANDIDATE* (If Applicable) | AMOUNT REPAYED |
|----------------------|---|--|----------------|
| | | | \$ |
| | | | |
| | | | |
| | | | |

TOTAL (PART I) \$ 2,500.00

TOTAL CASH REPAYMENTS (PART II) \$ —
 From Schedule E -- TOTAL LOANS FORGIVEN \$ —
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 2,500.00

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