

DISCLOSURE SUMMARY PAGE

NO. 336
DH-2
(Rev. 01/98)

P. 1/20
DISCLOSURE
REPORT

COMMITTEE NAME (Must be same as on Statement of Organization)
Marshall County Democratic Central Committee

IMPORTANT: Indicate type of committee you are reporting for: 7

(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

For Office Use Only
 Comm. # 9100
 Indexed W - tracked
 Audited _____
 Computer _____

Dave Fleming 641-753-6268
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

5-18-04
 DATE SIGNED

ALTERNATIVE DISCLOSURE BOARD
 MAY 19 2004
 FILED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$500

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 FILED

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.)	\$	<u>775.13</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A)	\$	<u>7136.⁴¹</u>
Schedule F: Loans Received total (Attach Schedule F)	\$	<u>.0</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	\$	<u>.0</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>7911.74</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B)	\$	<u>3858.⁰⁹</u>
Schedule F: Loan Repayments total (Attach Schedule F)	\$	<u>.0</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>4053.⁶⁵</u>

UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>.0</u>
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>.0</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>.0</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		___ YES ___ NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	_____

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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
1-7-04	ID# CK# 1353	Kathryn Wise covered. 2304 Wakefield Drive Mtawn 50158		\$ 5.00	
1-7-04	ID# CK# 5202	Leonard L Grimes 2353 - 233rd St. Mtawn 50158		25.00	
1-7-04	ID# CK# C	Numerous Individuals contributing \$10.00 or less each 1-7-04 Mtg hat pass		43.00	
1-31-04	ID# CK#	Lennox Employees Credit Union 1004 East Main Mtawn 50158 Dvd. Auto deposit		.66	
2-4-04	ID# CK# C	Numerous Individuals contributing \$10.00 or less each 2-4-04 Mtg hat pass		40.00	
2-8-04	ID# CK# 2024	Kim Smith 205 N. 4th St. Mtawn 50158		24.00	
2-15-04	ID# CK# 11429	Dave Flansburg 103 N. 13th Ave Mtawn 50158		25.00	
2-29-04	ID# CK#	Lennox Employees Credit Union 1004 East Main Mtawn 50158 Dvd Auto dep		.46	
2-28-04	ID# CK# 8106	Larry Binstel 3141 Davidson Ave. Rhodes 50234		25.00	
↓	ID# CK# 1296	Joel Kunkler 2806 Arnold dr. Mtawn 50158		200.00	
SUB-TOTAL				\$ 388.12	
TOTAL (if last page of this schedule)				\$	

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CONTRIBUTIONS - MONEY TAKEN IN
(Including candidate's personal funds)

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

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2-28-04	ID# CK# 2629	Mick Blackburn 1411 W Main Mtairn 50158		\$ 25 ⁰⁰	
	ID# CK# 2459	Jack Hayes 2422 Olive Branch Rd Mtairn 50158		100. ⁰⁰	
	ID# CK# 1970	Judith Kading P.O. box 284 Mtairn 50158		50 ⁰⁰	
	ID# CK# 7207	Mr. Don Ruth 2043-A Wallace Ave. Mtairn 50158		40 ⁰⁰	
	ID# CK# 3812	Dorey Benick 1809 W. Main Mtairn 50158		40 ⁰⁰	
	ID# CK# 2141	Cynthia Stockner 2108 Vermillion Mtairn 50158		50 ⁰⁰	
	ID# CK# 2810	H. William Helgen 409 Thomas Dr. Mtairn 50158		40 ⁰⁰	
	ID# CK# 6997	Kathy Baker 10 N. 9th St. Mtairn 50158		160. ⁰⁰	
	ID# CK# 3568	Jeanette Grady 106 E Lincoln Mtairn 50158		40 ⁰⁰	
	ID# CK# 1055	Bernard L. Grady 9 W. Lynn St. Mtairn 50158		50 ⁰⁰	

SUB-TOTAL \$ 595.⁰⁰
TOTAL (if last page of this schedule) \$

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For Instructions, See Back of Form

Reset Form

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

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2-28-04	ID# CK# 7701	Eldon Schneider 1015 Oaks Ave. Mt Pleasant 50158		\$ 40.00	<input type="checkbox"/>
	ID# CK# 4397	Arvine French 802 W. Linn St. Mt Pleasant 50158		40.00	<input type="checkbox"/>
	ID# CK# 6199	Margaret Bowman 702 1/2 W Main Mt Pleasant 50158		25.00	<input type="checkbox"/>
	ID# CK# 1812	Mary B. Welsh 502 N. Oak St. Mt Pleasant 50158		25.00	<input type="checkbox"/>
	ID# CK# 8900	Margaret J. Day 508 E. South St. Mt Pleasant 50158		25.00	<input type="checkbox"/>
	ID# CK# 2074	Lee Berger 203 Bohem St. Mt Pleasant 50158		40.00	<input type="checkbox"/>
	ID# CK# 4629	Martice Fischer 1407 - 41st St. Des Moines 50311		40.00	<input type="checkbox"/>
	ID# CK# 7318	Karen Clauer 2734 Rockton dr. Mt Pleasant 50158		25.00	<input type="checkbox"/>
	ID# CK# 2421	Myrna Franz P.O. box 44 Harcourt 50120		40.00	<input type="checkbox"/>
	ID# CK# 3494	Richard Banghart 11 E North St. Mt Pleasant 50158		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 325.00	
TOTAL (if last page of this schedule)				\$	

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2-28-04	ID# CK# 3615	David Winterton 202 - 2nd St. S.E. State Ct. 50247		\$ 40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 7251	Sava Canade 5 S. 12th St. Mtwin 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2513	Carole Winkleblack 608 Forest Blvd Mtwin 50158		100 ⁰⁰	<input type="checkbox"/>
	ID# CK# 4125	Gerald L. Hues 1605 S. 2nd St. Mtwin 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 4365	Frances Brewster 409 Meadow Lane Mtwin 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1986	Michael Brewster 409 Meadow Lane Mtwin 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 7016	James Fenelon 2510 S. 4th St. Apt 4031 Mtwin 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 4783	Kathleen Dooly 113 N. 7th St. Mtwin 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1088	Karen Lischer 816 Roberts Terrace Mtwin 50158		100 ⁰⁰	<input type="checkbox"/>
✓	ID# CK# 1461	Catherine A. Noble P.O. box 186 State Ct. 50247		40 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 445 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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2-28-04	ID# CK# 6723	Joyce Adkisson 1963 Vance Ave. Mtairn 50158		\$ 40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 6148	Carol J. Roberts 206 Highland Acres Rd. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1971	Judith Kading P.O. box 284 Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2727	Willard Accord 2618 Cooper Ave. State Ctr 50247		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1503	Annex Mc Donnell 1325 W. Linn St. Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 9583	Robert Manciewi 210 N. 16th St. Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1295	Good Kunkler 2806 Arnold Dr. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 4192	John D Foster 2905 Arnold Dr. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1254	Arlene McAtee 505 Highland Dr. Mtairn 50158		160 ⁰⁰	<input type="checkbox"/>
	ID# CK# 7756	Beverly Amsterdam-Thomas 2161 - 180th St. Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 460 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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2-28-04	ID# CK# 10763	Bert Peunna 106 College View Ln. Mtairn 50158		\$ 40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2310	Anne Bacon 411 W. Church St. Mtairn 50158		50 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1283	Julie A. Okendout 411 W. Church St. Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2319	Rose Maschick 408 Main St. Clairns 50001		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 5303	Leonard Grimes 2353 - 233rd St. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1501	Tracy Dielman P.O. box 83 Hibran 50005		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2162	Robert E. Riden, Jr. 904 Highland Acres Rd Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 12112	Pat Jordan 506 W. Church St. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1918	Sally KlinkcFus 2638 - 250th St. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1403	Kathryn Wise Casper 2304 Wakefield dr. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 375 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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2-28-04	ID# CK# 9490	Mary Giese 402 Richard Lane Mtairn 50158		\$ 40. ⁰⁰	<input type="checkbox"/>
	ID# CK# 6787	Leita J. Sawtelle 1112 Highland Acres Rd. Mtairn 50158		25. ⁰⁰	<input type="checkbox"/>
	ID# CK# 2658	Frank Hayes 2422 Olive Branch Rd. Mtairn 50158		40. ⁰⁰	<input type="checkbox"/>
	ID# CK# 10907	Hainette Sawtelle 308 S. 6th St. Mtairn 50158		40. ⁰⁰	<input type="checkbox"/>
	ID# CK# 3337	Jeanette Conway 2551 Parker Ave. Mtairn 50158		40. ⁰⁰	<input type="checkbox"/>
	ID# CK# 7452	Helene A. Edel 301 W. State Mtairn 50158		25. ⁰⁰	<input type="checkbox"/>
	ID# CK# 1541	Delmar H. Edel 407 W. Main St. 103 Mtairn 50158		25. ⁰⁰	<input type="checkbox"/>
	ID# CK# 4956	Maxine Lister 504 Dobra dr. Mtairn 50158		40. ⁰⁰	<input type="checkbox"/>
	ID# CK# 2603	Gyovanne Nauman 1001 W. State 6th Mtairn 50158		40. ⁰⁰	<input type="checkbox"/>
✓	ID# CK# 5298	Kristi H. Conper 1808 S. 3rd St. Mtairn 50158		40. ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 355. ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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2-28-04	ID# CK# 2405	Christine Lindgren 1703 Hillcrest Rd. Mtairn 50158		\$ 75 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1462	Ruth Schubert 701 Lee Street Mtairn 50158		20 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1324	Bob Schubert 701 Lee Street Mtairn 50158		20 ⁰⁰	<input type="checkbox"/>
	ID# CK# 3186	Haulietta Holland 809 W. Main Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2016	Carol Bottom 206 N. Center Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2782	Beverly Wilder 306 S. 2nd St. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 3822	Verna Wilkins 907 May St. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 3007	Diana Wilder-Tomlinson 1210 SE Wanda dr. Ankeny 50021		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1032	Susan Cahill 202 N. 167 St. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
✓	ID# CK# 7607	Margery Eickhorn 2422 - 2481 1/2 St. Mtairn 50158		65 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 405 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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2-28-04	ID# CK# 2067	Alan Smith 205 N. 6th St. Mtairn 50158		\$ 40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 8190	C.E. Lundholm 2375 W 186th St. Mtairn 50158		50 ⁰⁰	<input type="checkbox"/>
	ID# CK# 5180	Ram Brewer-Michael 801 N. 4th St. Mtairn 50158		50 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2256	Peggy Kelly 510 Newcastle Rd. Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 11443	Dave Fleming 103 N. 13th Ave. Mtairn 50158		15 ⁰⁰	<input type="checkbox"/>
	ID# CK# 5562	Mary R. Vejgart 2536 Oaks Ave. Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 9924	Olive M Webber Horan 1016 S. 10th Ave. Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 5516	Wallace Pannor 302 Plaza Heights Rd, Apt 3 Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# C	Numerous Individuals Contributing \$200 or less each		1016.91	<input type="checkbox"/>
3-2-04	ID# CK# C	Dave Fleming 103 N. 13th Ave. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$1326.91	
TOTAL (if last page of this schedule)				\$	

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Marshall County Democratic Central Committee

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/YY)	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
3-3-04	ID# CK# 8082	Bradley Weidmann 608 Fremont St. Mtairn 50158		\$ 24 ⁰⁰	<input type="checkbox"/>
3-3-04	ID# CK# 7110 7110	Kathryn Wiseman 2304 Wakefield Dr. Mtairn 50158		5 ⁰⁰	<input type="checkbox"/>
3-3-04	ID# CK# C	Numerous Individuals contributing \$10 ⁰⁰ or less each Mt. Pass the hat		92 ⁰⁰	<input type="checkbox"/>
3-3-04	ID# CK# 7179	Robert Kern 301 N. 9th St. Mtairn 50158		40 ⁰⁰	<input type="checkbox"/>
3-13-04	ID# CK# 2598	Shirley J. Bloom 3375 Reed Ave. Lansd 50141		12 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1468	Linda Appenauer 3112 - 170th St. Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1062	Minda L. Wolf 304 Wakefield Circle Mtairn 50158		20 ⁰⁰	<input type="checkbox"/>
	ID# CK# 9931	Oliver M. Webber-Nelson 1216 S. 10th Ave. Mtairn 50158		12 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1518	Anni M. McDermott 1325 W. Linn St. Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 9080	Susan Cahill 202 N. 1st St. Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 250 ⁰⁰	
TOTAL (If last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

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)
Marshall County Democratic Central Committee

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
3-13-04	ID# CK# 11465	David Fleming 103 N. 13th Ave. Mtairn 50158		\$ 20 ⁰⁰	<input type="checkbox"/>
	ID# CK# 7625	Margary Eichorn 2422-248th St. Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2793	Beverly Wilder 306 S. 2nd St. Mtairn 50158		20 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2268	Dianne J. Nichols 607 S. 12th St. Mtairn 50158		20 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1079	Beverly Hinshaw 705 Circle Dr. Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1559	Marion Duggett 216 N. 2nd Ave. Apt 119 Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 7198	Clavissa Thompson 2846 Green Castle Rd. Gilman 50106		2 ⁰⁰	<input type="checkbox"/>
	ID# CK# 9008	Judy L. Lane-Malvarri 1320 W. Church St. Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2258	Georgia V. Flater 409 N. 8th St. Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2651	Doug Campbell 2981-260th St. Mtairn 50158		30 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 142 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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Reset Form

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)
Marshall County Democratic Central Committee

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DATE RECEIVED (MM/DD/YY)	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
3-13-04	ID# CK# 3294	Suzanne A. Willoner 810 Arlington Dr. Mtairn 50158		\$ 10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1604	Megan Hakeberg 487 James Blvd Mtairn 50158		20 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1482	Karin E Hall 808 Jackson Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 9048	Susan Cahill 202 N. 1st St. Mtairn 50158		12 ⁰⁰	<input type="checkbox"/>
	ID# CK# 9850	Donna Graham 1607 Norris Pl. Mtairn 50158		20 ⁰⁰	<input type="checkbox"/>
	ID# CK# 7068	Mrs. Jim Conroy 2350 W Main St. Rd Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1554	Marian W Dongett 216 N. 2nd Ave. Apt #4 Mtairn 50158		12 ⁰⁰	<input type="checkbox"/>
	ID# CK# 7069	Mrs. Jim Conroy 2350 W. Main St. Rd Mtairn 50158		25 ⁰⁰	<input type="checkbox"/>
	ID# CK# 4473	Dennis Buffington 1006 S. 7th Ave. Mtairn 50158		10 ⁰⁰	<input type="checkbox"/>
✓	ID# CK# 6625	Yvonne Newman 1001 W. State Mtairn 50158		20 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 149 ⁰⁰	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

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)
Marshall County Democratic Central Committee

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CAUTION: Section 68B.32A(8), 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
3-13-04	ID# CK# 7197	Clavissa Thompson 2846 Queen Castle Rd Gilman 50106		\$ 10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 2144	Cynthia A. Stockner 2108 Vermillion Mt Pleasant 50158		20 ⁰⁰	<input type="checkbox"/>
	ID# CK# 4291	Kenneth Michels 802 Main St. Melbourne 50162		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 8116	Larry Ginter 3191 Davidson Ave. Rhodes 50234		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 1260	Vickie Lewis 204 Balcon St. Mt Pleasant 50158		40 ⁰⁰	<input type="checkbox"/>
	ID# CK# 4126	Carric Baer 2285 Main Blvd Mt Pleasant 50158		10 ⁰⁰	<input type="checkbox"/>
	ID# CK# 368	Valerie Jo Busse 1505 West Church St. Mt Pleasant 50158		12 ⁰⁰	<input type="checkbox"/>
	ID# CK# 4847	Rhea M. Osland P.O. box 191 Laurel 50141		12 ⁰⁰	<input type="checkbox"/>
	ID# CK# C	Numerous Individual Contributions \$10 ⁰⁰ or less each		1543 ⁰⁰	<input type="checkbox"/>
3-31-04	ID# CK#	Lenora Employees Credit Union 1004 E Main Mt Pleasant 50158 Fed Auto Depo		1,39	<input type="checkbox"/>
SUB-TOTAL				\$ 1668.39	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE	
A	MONETARY RECEIPTS
(Rev. 07/03)	
<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)

Marshall County Democratic Central Committee

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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
4-7-04	ID# CK# 3287	Nina Biersen 2454 Binford State Ct 50247		\$ 40 ⁰⁰	<input type="checkbox"/>
4-7-04	ID# CK# C	Numerous Individuals (cont.) butting \$10 ⁰⁰ or less each Mtg hot pass 4-7-04		50 ⁰⁰	<input type="checkbox"/>
4-19-04	ID# CK#	Dave Kristian 202 - 2nd St. SE. State Ct. 50247 Auto Dep.		10 ⁰⁰	<input type="checkbox"/>
4-19-04	ID# CK#	Bob Christiansen Auto Dep.		10 ⁰⁰	<input type="checkbox"/>
4-20-04	ID# CK# C	Keith Straff Forwarded Exp to District by check		20 ⁰⁰	<input type="checkbox"/>
4-25-04	ID# CK# 1343	Jarvis Ott 415 N. 8th St. Mtairn 50158		20 ⁰⁰	<input type="checkbox"/>
4-30-04	ID# CK#	Lennox Emp Credit Union 1004 E Main Mtairn 50158 Dad Auto Dep.		2 ¹²	<input type="checkbox"/>
5-3-04	ID# CK#	Carol Bottom 206 N. Ct Mtairn 50158 Auto Dep.		10 ⁰⁰	<input type="checkbox"/>
5-3-04	ID# CK#	Kathy Wasserman 2304 Wake Field dr. Mtairn 50158 Auto Dep		10 ⁰⁰	<input type="checkbox"/>
5-5-04	ID# CK#	Dave Fleming 103 N. 13th Ave. Mtairn 50158 Auto Dep		10 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 182.12	
TOTAL (if last page of this schedule)				\$	

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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)
Marshall County Democratic Central Committee

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
2-3-04	ID# CK# 1541	<i>Times Republican 128 W Main Mtairn 50158</i>	<i>CAUCUS Ad</i>	\$ 151. ⁴²
2-9-04	ID# CK# 1542	<i>Mtairn Park & Rec 906 N. 3rd Ave. Mtairn 50158</i>	<i>Answer Ranted 7-28-04</i>	55. ⁰⁰
2-10-04	ID# CK# 1543	<i>Postmaster 311 E Lynn Mtairn 50158</i>	<i>Annual Box Post 152</i>	38. ⁰⁰
2-12-04	ID# CK# 1544	<i>Dave Fleming 103 N. 13th Ave. Mtairn 50158</i>	<i>Reimburse Conv. Supplies</i>	32. ⁷⁶
2-19-04	ID# CK# 1545	<i>Mtairn Main 102 S. 1st St. Mtairn 50158</i>	<i>Copies Bylaws & Plat Form</i>	4. ⁷⁷
2-19-04	ID# CK# 1546	<i>Postmaster 311 E Lynn Mtairn 50158</i>	<i>4/Rolls - 23 Stamps - Franchise</i>	92. ⁰⁰
2-25-04	ID# CK# 1547	<i>Staples 27 W. Berke Rd Mtairn 50158</i>	<i>180 Copies Platform</i>	176. ⁷⁴
2-28-04	ID# CK# 1548	<i>Char Hinceck State Ch. 50247</i>	<i>190x 750 Meals</i>	1425. ⁰⁰
SUB-TOTAL				\$ 1975. ⁶⁹
TOTAL (if last page of this schedule)				\$

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 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).)

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)
Marshall County Democratic Central Committee

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
3-1-04	ID# CK# 1549	Postmaster 311 E Linn Mtairn 50158	190x60 Stamps - Convention	\$ 114 ⁰⁰
3-1-04	ID# CK# 1550	Postmaster 11	14 add. 60 Stamps Convention	8 ⁴⁰
3-3-04	ID# CK# 1551	Kim Smith 205 N. Ctr St. Mtairn 50158	Reimburse Handwritten exps.	20 ¹²
3-6-04	ID# CK# 1552	Stones Restaurant Mtairn 50158	Speaking Lunch	7 ⁵⁰
3-13-04	ID# CK# 1553	Chan Huntley State Ctr. 50247	Cty Convention meals	490 ⁰⁰
3-15-04	ID# CK# 1554	IVCED 3702 S Ctr St. Mtairn 50158	Rent 2-28-04 - 3-13-04	375 ⁰⁰
3-15-04	ID# CK# 1555	Kim Smith 205 N. Ctr St. Mtairn 50158	Reimburse Convention Exps.	35 ⁸³
3-15-04	ID# CK# 1556	Hambrook Holland 809 W Main Mtairn 50158	Reimburse donuts etc. For Convention	40 ⁰⁰
SUB-TOTAL				\$ 1090 ⁸⁵
TOTAL (if last page of this schedule)				\$

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 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

Reset 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)
Marshall County Democratic Central Committee

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
3-17-04	ID# CK# 1557	<i>Hwy Pac Mtawn 50158</i>	<i>add. box lunches Convention</i>	\$ 287. ⁴⁰
4-8-04	ID# CK# 1558	<i>Mnd - Iowa Publication State Cir. 50247</i>	<i>Concurs Ad</i>	111. ²⁴
4-11-04	ID# CK# 1559	<i>Postmaster 311 E Linn Mtawn 50158</i>	<i>1 Pk - 37 Stamps</i>	37. ⁰⁰
4-16-04	ID# CK# 1560	<i>4th District Central Committee -</i>	<i>Forward Convention Fee For Keith Street</i>	20. ⁰⁰
4-27-04	ID# CK# 1561	<i>L-S Rental Mtawn 50158</i>	<i>April-May Storage Rent</i>	95. ⁴⁰
4-29-04	ID# CK# 1562	<i>UAW 893 411 Iowa Ave., West Mtawn 50158</i>	<i>Reimburse Postal Stationery Tape</i>	48. ⁵³
5-1-04	ID# CK# 1563	<i>Stones Restaurant Mtawn 50158</i>	<i>Speakers Lunch</i>	7. ⁰⁰
5-5-04	ID# CK#	<i>Lennox Exp Credit Union 1004 E Mason Mtawn 50158 Auto debit</i>	<i>Activities Report 2 pages</i>	3. ⁰⁰
SUB-TOTAL				\$ 609. ⁵⁷
TOTAL (If last page of this schedule)				\$

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 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)(f).)

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

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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)
Marshall County Democratic Central Committee

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
5-14-04	ID# CK# 1564	<i>Karen Smith 205 N. CL Mt. View 50158</i>	<i>Reimburse Fundraising exps.</i>	<i>181.98</i> \$
	ID# CK#			
SUB-TOTAL				\$ <i>181.98</i>
TOTAL (if last page of this schedule)				\$ <i>3858.04</i>

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 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).)