FOR INSTRUCTIONS, SEE BACK OF FORM

FEB - 3 2004

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT

For Office Use Only
Comm. # _____
Indexed _____
Audited _____
Computer _____

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Build Educational Spaces for Today and Tomorrow

IMPORTANT: Indicate type of committee you are reporting for: 6

(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 Slate of Candidates

Ellen R. Burgmeier — 641-752-5933 — 1-30-2004
SIGNATURE OF TREASURER (or person filing this report) — TELEPHONE — 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 2-1-04 (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: 1-27-04
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.) ..... $ 4299.43

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 15,135.00
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 ..... $ 19,434.43

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 8152.-
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) ..... $ 11,282.43

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) $ _____

For Instructions, See Back of Form

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

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Build Educational Spaces for Today and Tomorrow

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(5), 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
1-20-04	ID# CK#	Leo Herrick 2106 S 12th Street Marshalltown, IA 50158		$ 100.-	
1-20-04	ID# CK#	Dale Ites 2019 Elmcrest Dr. Marshalltown, IA 50158		50.-	
1-20-04	ID# CK#	United Bank - Trust 2101 South Center St. Marshalltown, IA 50158		600.-	
1-20-04	ID# CK#	Marshalltown Premier Line 104 S 8th Avenue Marshalltown, IA 50158		750.-	
1-21-04	ID# CK#	Mark McKibben 2007 S. 5th Avenue Marshalltown, IA 50158		30.-	
1-21-04	ID# CK#	Edward Redden 502 Hidden Hill Dr Marshalltown, IA 50158		100.-	
1-21-04	ID# CK#	Cooper Manufacturing 410 S. 1st Ave Marshalltown, IA 50158		750.-	
1-21-04	ID# CK#	Marshalltown Medical - Surgical Ctr. 3 S. 4th Avenue Marshalltown, IA 50158		10,000.-	
1-21-04	ID# CK#	F+M Bank 11 N 1st Avenue Marshalltown, IA 50158		500.-	
1-21-04	ID# CK#	Tama State Bank 1610 S Center Marshalltown, IA 50158		250.-	
			SUB-TOTAL	$13,130.-	
			TOTAL *(If last page of this schedule)*	$	

* 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

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

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Build Educational Spaces for Today and Tomorrow

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
1-22-04	ID# CK#	Kacom 201 W. State St. Marshalltown, IA 50158		$ 250.-	
1-22-04	ID# CK#	R. S. Stover Company 3809 S. Center Street Marshalltown, IA 50158		250.-	
1-22-04	ID# CK#	Doug Gervich 1009 W. Main St Marshalltown, IA 50158		50.-	
1-22-04	ID# CK#	Terry Buzbee 205 S. Center St. Marshalltown, IA 50158		150.-	
1-26-04	ID# CK#	Gene Oxley 1911 Bailey Dr. Marshalltown, IA 50158		30.-	
1-26-04	ID# CK#	Wells Fargo Bank 102 S. Center St. Marshalltown, IA 50158		500.-	
1-26-04	ID# CK#	Fisher Controls 205 S. Center St. Marshalltown, IA 50158		750.-	
	ID# CK#	Unitemized		25.-	
	ID# CK#				
	ID# CK#				

SUB-TOTAL $2005.-

TOTAL *(If last page of this schedule)* $15,135.-

* 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

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Build Educational Spaces for Today and Tomorrow

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
1-23-04	ID# CK#	Victory Enterprises 5200 S.W. 30th St, Ste 7 Davenport, IA 52802	Media on KIX 101.1 & KFJB	$ 1152.-
1-23-04	ID# CK#	L+L Murphy Associates 531 6th St. Northwest Oelwein, IA 50662	Professional Services for 12-03 - 1-04	7000.-
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$ 8152.-
			TOTAL *(If last page of this schedule)*	$ 8152.-

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)(l).)