

DISCLOSURE SUMMARY PAGE

APR 30 2004

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

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

IMPORTANT: Indicate type of committee you are reporting for:  (2)

( 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

Allen H. Bergman 641-752-5933  
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

4-28-04  
 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 FINAL REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.  
 (report date) Indicate one  (1)

CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

Local Committees, enter Date of Election  
1-27-04  
 County & Local Committees, enter County in which Election is held  
Marshall

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 <b>MUST</b> 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>11,282.43</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A).....		<u>750.-</u>
Schedule F: Loans Received total (Attach Schedule F).....		<u>-</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....		<u>-</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
	SUB-TOTAL.....\$	<u>12,032.43</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) .....		<u>12,032.43</u>
Schedule F: Loan Repayments total (Attach Schedule F) .....		<u>-</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) .....	\$	<u>-0-</u>

UNPAID BILLS (From Schedule D - Attach Schedule D) .....	\$	<u>-</u>
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....	\$	<u>3356.15</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$	<u>-</u>

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 <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> 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
2-6-04	ID# CK#	Patrick Kremer 206 Harmony Dr. Marshalltown, IA 50158		\$ 100.-	
2-6-04	ID# CK#	Mike Bergman 404 N. 5th St. Marshalltown, IA 50158		100.-	
2-6-04	ID# CK#	Pat Apgar 1100 W. Olive St. Marshalltown, IA 50158		100.-	
2-26-04	ID# CK#	Bill Eders 1705 Country Club Place Marshalltown, IA 50158		200.-	
3-29-04	ID# CK#	Wolfe Clinic 309 E. Church St. Marshalltown, IA 50158		250.-	
	ID# CK#				

SUB-TOTAL

\$ 750.-

TOTAL (if last page of this schedule)

\$ 750.-

\* 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**

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)  
*Build Educational Spaces for Today - 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
2-2-04	ID# CK#	Victory Enterprises 5200 S.W. 30th St. Ste. 7 Davenport, IA 52802	Printing, postage, radio advertising - media production	\$4339.52
2-5-04	ID# CK#	Times Republican 135 W. Main St. Marshalltown, IA 50158	Advertising	2344.76
3-16-04	ID# CK#	L+L Consulting 531 6th St. NW Oelwein, IA 50662	Professional Services	4200.-
3-16-04	ID# CK#	Kim Smith 205 N. Center St. Marshalltown, IA 50158	Labels for mailing	22.25
3-29-04	ID# CK#	Marshalltown Comm. Schools 317 Columbus Dr. Marshalltown, IA 50158	postage - to close acct.	1120.90
3-16-04	ID# CK#	Wells Fargo Bank 666 Walnut St. Des Moines, IA 50309	Bank fee	5.00
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$12,032.43  
 TOTAL (if last page of this schedule) \$12,032.43

**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  
This form is not applicable to statutory political committees.

### Notice of Dissolution

APR 30 2004

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

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

**COMMITTEE NAME**

Official Name of Committee	
Build Educational Spaces for Today and Tomorrow Street	
404 N. 5th Street	
City, State, Zip Code	
Marshalltown, IA 50158	
Area Code	Telephone
(641) 752-5933	

Effective date of dissolution:

2004

Ellen R. Bugman

Signature of Treasurer

4-28-04

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.