

DISCLOSURE SUMMARY PAGE

Reset Form

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

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

Citizens for Monona County Extension

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

CANDIDATE COMMITTEES ONLY:

Candidate Name _____ Political Party _____

Office Sought _____ District (if Senate or House) _____

Audited _____

JUN 28 2004

VOL

Fran Black 712-455-2208 6-25-04
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE 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 5 days prior to election REPORT FOR AN/A (1) ELECTION //(2)NON-ELECTION YEAR.
 (report date) report

CHECK IF AMENDMENT TO REPORT DATED beginning of com. Indicate one

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
Nov. 2, 2004

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

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>- 0 -</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>\$ 926.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>-</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>-</u>
(Schedule H applies to Candidates' Committees Only)		
	SUB-TOTAL	\$
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>7.40</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>918.60</u>

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>-</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>-</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

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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)
Citizens for Monona County Extension

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
5-8-04	ID# CK#	Geri + Carl Johnson 1714 16th St. Onawa, Ia. 51040		\$ 50. ⁰⁰	<input type="checkbox"/>
5-8-04	ID# CK#	Coberly Accounting 900 Iowa Onawa Ia. 51040		50. ⁰⁰	<input type="checkbox"/>
5-8-04	ID# CK#	Vincent Willey 351 Pike Ct. Whiting Ia. 51063		50. ⁰⁰	<input type="checkbox"/>
5-12-04	ID# CK#	Badger 4-H Club 15746 170th St. Whiting, Ia. 51063		100. ⁰⁰	<input type="checkbox"/>
5-16-04	ID# CK#	Western Iowa Coop. Box 106 Hornick, Ia. 51026		50. ⁰⁰	<input type="checkbox"/>
5-28-04	ID# CK#	Valley Bank + Trust 401 Main Mapleton Ia. 51034		100. ⁰⁰	<input type="checkbox"/>
5-28-04	ID# CK#	First State Bank 402 Main Mapleton, Ia. 51034		40. ⁰⁰	<input type="checkbox"/>
5-28-04	ID# CK#	Seutjens Auction Box 75 Mapleton Ia. 51034		15. ⁰⁰	<input type="checkbox"/>
6-5-04	ID# CK#	S + H Drilling Box 105 Onawa Ia. 51040		50. ⁰⁰	<input type="checkbox"/>
6-7-04	ID# CK#	Mapleton Starspinner 39467 St. Hwy. 175 Mapleton, Ia. 51034		50. ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 555. ⁰⁰	
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). 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

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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)
Citizens for Monona County Extension

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
6-10-04	ID# CK#	Julie Miller 25578 245th St. Onawa, Ia. 51040		\$ 25.00	<input type="checkbox"/>
6-17-04	ID# CK#	Master Theses Directories Box 38 Moorhead, Ia. 51558		200.00	<input type="checkbox"/>
6-19-04	ID# CK#	Maple Valley School District 401 S. 6th St. Mapleton Ia. 51034		50.00	<input type="checkbox"/>
6-20-04	ID# CK#	Unitemized contributions		96.00	<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 371.00	
TOTAL (if last page of this schedule)				\$ 926.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	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)
Citizens for Monona County Extension

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
5/8/04	ID# CK# 101	U.S. Post Office	postage	\$ 7.40
	ID# CK#			

SUB-TOTAL \$ 7.40

TOTAL (if last page of this schedule) \$ 7.40

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.402(3)(i).)