

Montgomery

FOR INSTRUCTIONS, SEE BACK OF FORM

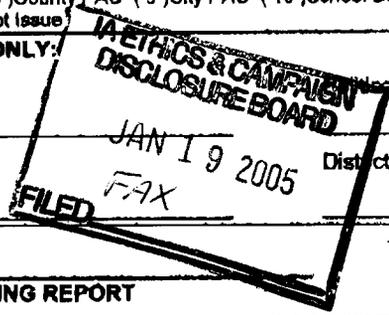
DISCLOSURE SUMMARY PAGE

FORM DR-2 DISCLOSURE REPORT (Rev. 07/2004) For Office Use Only Comm. # 17531 Logged In on Scanned Computer sm Audited

COMMITTEE NAME (Must be same as on Statement of Organization) Committee to Elect Joni K Ernst County Auditor

IMPORTANT: Indicate by # type of committee you are reporting for: 5 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY: Candidate Name Office Sought



Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF PERSON FILING REPORT (Signature) TELEPHONE 712.623.8867 DATE SIGNED Jan. 19, 2005

I AM FILING A January 19, 2005 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR. (report date) Indicate by # 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 DR-3 is filed.)

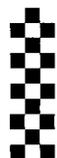
Local Committees, enter Date of Election November 2, 2004 County & Local Committees, enter County in which Election is held Montgomery

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$ 2894.38), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 105.00), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: 2059.90), CASH ON HAND at the end of this reporting period (\$ 939.48)

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 5.90 \*\*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



SCHEDULE <b>A</b> (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)**  
 Committee to Elect Joni K Ernst County Auditor

**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
10-28	ID# CK#	Bruce Swanson PO Box 78 Red Oak, Ia		\$ 50.00	<input type="checkbox"/>
10-30	ID# CK#	Republican Party of Iowa 621 E 9th Street Des Moines, IA		50.00	<input type="checkbox"/>
10-30	ID# CK#	Unitemized Miscellaneous contribution		5.00	<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"/>
<b>SUB-TOTAL</b>				\$ 105.00	
<b>TOTAL (If last page of this schedule)</b>				\$ 105.00	

\* 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). 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>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> 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)  
Committee to Elect Joni K Ernst County Auditor

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
10-13	ID# CK#	City of Stanton 205 Broad Avenue Stanton, IA	Meet the Candidate	\$ 30.00
10-22	ID# CK#	Red Oak Express 2012 Commerce Drive Red Oak Iowa 51566	Advertising	170.00
11-2	ID# CK#	Mary Lawson 404 N 8th Street Red Oak, Iowa	Absentee Voter List	39.75
12-8	ID# CK#	Hawkeye Communications PO Box 465 Red Oak, Iowa	Advertising	1733.75
12-8	ID# CK#	Villisca Review PO Box 7 Villisca, IA	Advertising	86.40
	ID# CK#			
	ID# CK#			
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 2059.90</b>
<b>TOTAL (If last page of this schedule)</b>				<b>\$ 2059.90</b>

**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)(l).)

(for Schedule B)

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

Committee to Elect Joni K Ernst County Auditor

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

SCHEDULE <b>D</b> (Rev. 08/99)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**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*
12-8	Villisca Review PO Box 7 Villisca, IA	Card of Thanks	\$ 5.90
SUB-TOTAL			\$ 5.90
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			<b>\$ 5.90</b>

\*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.