

1/1/04 → 5/14/04

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	9141
Logged In	SW tracked
Scanned	
Computer	
Audited	<input checked="" type="checkbox"/>

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

Muscatine 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

CANDIDATE COMMITTEES ONLY:

Candidate Name MAY 17 2004 Political Party

Office Sought _____ District (if Senate or House) _____

Sue Drains
SIGNATURE OF TREASURER (or person filing this report)

563/264-5087
TELEPHONE

5/14/04
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 1/1/04 - 5/14/04 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.
(report date) 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
County & Local Committees, enter County in which Election is held

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.) \$ 1250.01

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1190.73

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 \$ 2440.74

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 1021.20

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)..... \$ 1419.54

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

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$ 233.75

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)..... \$ _____

CANDIDATE COMMITTEES ONLY: YES NO

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Muscatine 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/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
1/26/04	ID# CK#	Anita Olson - contribution 2006 Burnside Muscatine, IA 52761		\$ 50.00	<input checked="" type="checkbox"/>
1/19/04	ID# CK#	Unitemized caucus contributions		168.53	<input type="checkbox"/>
1/19/04	ID# CK#	Unitemized - delegate/alternate county convention fees		113.00	<input type="checkbox"/>
3/15/04	ID# CK#	Bob Sanderbrich - contribution 2225 Imperial Oaks Muscatine, IA 52761		100.00	<input checked="" type="checkbox"/>
3/13/04	ID# CK#	Unitemized - delegate/alternate county convention fees		680.00	<input type="checkbox"/>
3/25/04	ID# CK#	Unitemized - Fund. / Finance meeting (pass the rat)		20.00	<input checked="" type="checkbox"/>
4/3/04	ID# CK#	" " "		15.00	<input checked="" type="checkbox"/>
4/20/04	ID# CK#	Unitemized - MBCC meeting (pass the rat)		44.20	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$1190.73

TOTAL (if last page of this schedule)

\$1190.73

* 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.

Reset Form

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)
Muscatine County Democratic Central Comm.

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
1/16/04	ID# CK# 560	Muscatine Journal 301 E. 3rd St. Muscatine, IA 52761	precinct location advertisement	\$ 107.40
2/20/04	ID# CK# 562	Muscatine County Fair 101 North Clay West Liberty, IA 52776	county fair exhibit space	200.00
3/4/04	ID# CK# 563	Muscatine Comm Schools Mulberry Ave Muscatine, IA 52761	rental for county convention	99.00
3/4/04	ID# CK# 564	Midwest Printing (Betty Mc Mahon) 102 Grove Road, Long Grove, IA 52748	printing of convention books	266.80
3/6/04	ID# CK# 565	USPS, Houser + Cedar St. Muscatine, IA 52761	bulk mailing permit annual fee	150.00
3/6/04	ID# CK# 566	" "	mailing of convention books	49.60
5/1/04	ID# CK# 567	Ruth Webb Memorial Fund, Muscatine	gift for former committee officer	25.00
5/4/04	ID# CK# 568	Mailboxes/Parcels 429 Lake Park Blvd Muscatine, IA 52761	printing for fund-raiser mailing	42.80
SUB-TOTAL				\$ 940.60
TOTAL (if last page of this schedule)				\$

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Muscatine County Democratic Central Committee

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
3/2/04	Betty + Bud McMahon 3111 E 180 St. Muscatine, IA 52761		paid for imprints printing bulk mail fee	150.00	<input type="checkbox"/>
2/13/04	" "		paid for supplies for county comm.	41.75	<input type="checkbox"/>
4/13/04	" "		paid for 6 mo. fee for P.O. box	19.00	<input type="checkbox"/>
4/13/04	Richard + Helen Van Horzou 3302 Macinacket Muscatine, IA 52761		paid for 2nd 6 mo. fee for P.O. box	19.00	<input type="checkbox"/>
4/1/04	Marilyn Schepers 413 West 3rd St. Muscatine, IA 52761		paid for postage + postcards	4.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 233.75

TOTAL (if last page of this schedule) \$ 233.75

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.