

# DISCLOSURE SUMMARY PAGE

JAN - 5 2005

<b>FORM DR-2</b> (Rev. 01/98)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	9142
Indexed	~
Audited	
Computer	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
MUSCATINE COUNTY REPUBLICAN CENTRAL Comm.

**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  
 ( 8 ) Support State of Candidates

JoAnn Brauns 563-262-0455 1-3-05  
 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 JAN 19 - 2005 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.) .....\$ 2091.85

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ..... 590.00

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.....\$** 2681.85

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule D: Expenditures total (Attach Schedule D) .....

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) .....\$ 441.00

**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

SCHEDULE <b>A</b> (Rev. 06/97)	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)  
*Muscatine County Republican 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
10-13-04	ID# CK# 2978	RUTH EVAN 2015 WEST BAY DR. MUSCATINE IA 52761		\$ 10.00	
10-25-04	ID# CK# 2442	TOM SCHIESMAN 2673 HUCK FINN RD MUSCATINE, IA 52761		25.00	
10-25-04	ID# 9075 CK# 1052	COMMON WEALTH PAC PO Box 1780 BIRMINGHAM MI 48012-1780		500.00	
11-02-04	ID# CK#	VOIDED CHECK # 1632		40 -	
12-06-04	ID# CK#	UNITEMIZED		15 -	
	ID# CK#				

SUB-TOTAL

\$ 590 -

TOTAL (if last page of this schedule)

\$ 590 -

\* 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.

**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)  
**MUSCATINE COUNTY REPUBLICAN 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
10-22-04	ID# CK# 16 29	GREG ORR 2105 PINEFIELD MUSCATINE IA 52761	DONATION TO CAMPAIGN	\$ 500.00
10-22-04	ID# CK# 16 30	DYANN ROBY 2570 CANTERBURY MUSCATINE, IA 52761	DONATION TO CAMPAIGN	500.00
10-25-04	ID# CK# 16 31	JERRY COFFMAN PO BOX 65 MUSCATINE IA 52761	2 / BUSH SIGNS	60.00
10-25-04	ID# CK# 16 32	JERRY COFFMAN PO BOX 65 MUSCATINE IA 52761	SIGNS	40.00
10-28-04	ID# CK# 16 33	MUSCATINE POWER & WATER 3205 CEDAR ST. MUSCATINE, IA 52761	UTILITIES / HEADQ.	263.47
10-28-04	ID# CK# 16 34	DYANN ROBY 2570 CANTERBURY MUSCATINE IA 52761	ITEMS / GRASSLEY BREAKFAST	12.78
11-2-04	ID# CK# 16 35	KATIE REEB 2608 ASHFORD MUSCATINE IA 52761	WORK / OFFICE	540.00
11-22-04	ID# CK# 16 36	MUSCATINE POWER & WATER 3205 CEDAR MUSCATINE IA 52761	UTILITIES / HEADQ.	256.60
SUB-TOTAL				\$ 2172.85
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 56.6(3)(i).)

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COMMITTEE NAME (Must be same as on Statement of Organization)  
*MUSCATINE County Republican 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
12-07-04	ID# CK# 1637	POST MASTER MUSCATINE, IA 52761	PO Box RENT	\$ 68 -
	ID# CK#			
SUB-TOTAL				\$ 68 -
TOTAL (if last page of this schedule)				\$ 2240.85

**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)(1).)