

Plymouth

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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FORM DR-2 (Rev. 07/2004) DISCLOSURE REPORT For Office Use Only Comm. # 17752 Logged In [initials] Scanned [initials] Computer [initials] Audited

COMMITTEE NAME (Must be same as on Statement of Organization) Jim Henrich for Supervisor 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 Jim Henrich Political Party (if applicable) Office Sought Supervisor District (if Senate or House)

Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A July 19, 2004 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR. (report date) Indicate by #

- 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 11/02/2004 County & Local Committees, enter County in which Election is held Plymouth

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds 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.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total Schedule F: Loans Received total Schedule H: Total Sales of Campaign Property (Attach Schedule H) (Schedule H applies to Candidates' Committees Only) SUB-TOTAL SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total Schedule F: Loan Repayments total CASH ON HAND at the end of this reporting period (if final report balance must be zero) \*\*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?) VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

YES NO

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>BE</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)  
**JIM HEHRICH FOR SUPERVISOR**

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
5-31-04	ID# CK#	KLEM Radio 37 2nd AVE LEMARS, IA 51031	RADIO Ads	\$ 278
5-20-04	ID# CK#	LEMARS' SENTINEL	News PAPER Ad	87.30
5-22-04	ID# CK#	AKRON HOMETOWN Box 797 AKRON, IA 51001	News PAPER Ad	38.25
5-22-04	ID# CK#	AKRON REGISTER Box 407 AKRON, IA 51001	News PAPER Ad	45.00
	ID# CK#		YARD SIGNS	469.67
5-1-04	ID# CK#	BOB GRUPP 515 1st AVE LEMARS, IA 51031		
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 918.22</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)(i).)