

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



Plymouth

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	17565
Logged In	
Scanned	
Computer	
Audited	

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

Committee to Elect Dan Ryan

IMPORTANT: Indicate type of committee you are reporting for: 4

(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:

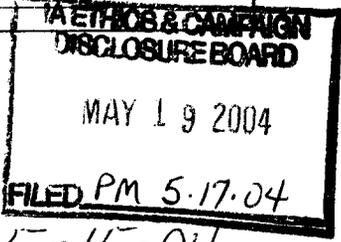
Candidate Name Dan Ryan Political Party Republican

Office Sought Plymouth County Auditor District (if Senate or House) _____

James A Ryan SIGNATURE OF TREASURER (or person filing this report)

712-546-6805 TELEPHONE

5-15-04 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 May 19 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
June 8 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. (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>3,275</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>- 0 -</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>- 0 -</u>
	SUB-TOTAL	<u>3,275</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....		<u>2,595.28</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>- 0 -</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>789.82</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>- 0 -</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>- 0 -</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>- 0 -</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>- 0 -</u>

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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)

Committee to Elect Dan Ryan

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
2-9-04	ID# CK#	Dan Ryan 34596 220th St Le Mars, Ia 51031	Self	\$1,000.	<input type="checkbox"/>
3-2-04	ID# CK#	Don Law 855 9th Ave SE Le Mars, Ia. 51031	friend	\$50.	<input type="checkbox"/>
4-11-04	ID# CK#	Dan Ryan 34596 220th St Le Mars, Ia 51031	Self	\$500.	<input type="checkbox"/>
5-7-04	ID# CK#	John Murphy 735 6th St S.E. Le Mars, Ia 51031	friend	\$25.	<input type="checkbox"/>
5-7-04	ID# CK#	Dan Ryan 34596 220th St Le Mars, Ia 51031	Self	\$800.	<input type="checkbox"/>
5-12-04	ID# CK#	Dan Ryan 34596 220th St Le Mars, Ia 51031	Self	\$700.	<input type="checkbox"/>
5-12-04	ID# CK#	Dave Mayrose 5050 Hacienda Dr. Apt. 828 Dublin, Ca 94568-7983	brother in law	\$200.	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$

TOTAL (if last page of this schedule)

\$3,275

* 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.

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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)
Committee to Elect Dan Ryan

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
2-12-04	ID# CK# 1000	Secretary of State Locust Bldg First Floor Des Moines, Ia 50319	list of Registered Republicans in Plymouth County	\$16.30
2-17-04	ID# CK#	Prime Bank 37 1st Ave NW LeMans, Ia 51031	checks printed	\$15.95
3-31-04	ID# CK#	Prime Bank 37 1st Ave NW LeMans, Ia 51031	service charge	\$2.11
4-8-04	ID# CK# 1001	Secretary of State Locust Bldg. First Floor Des Moines, Ia 50319	labels of Republican for mailings	\$16.30
4-22-04	ID# CK# 1002	Reds Printing 410 5th Ave SW Le Mans, Ia 51031	Campaign Posters	\$1,277.93
4-28-04	ID# CK# 1003	Reds Printing 410 5th Ave SW Le Mans, Ia 51031	postage stamp	\$10.60
4-28-04	ID# CK# 1004	Postmaster Le Mans, Ia 51031	postage	\$153.08
4-30-04	ID# CK#	Prime Bank 37 1st Ave NW Le Mans, Ia 51031	service charge	\$2.11
SUB-TOTAL				\$1,493.88
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).)

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Committee to Elect Dan Ryan

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
5-3-04	ID# CK# 1005	Akron Homctower 330 Reed St. Akron, Ia 51001	newspaper ad.	\$ 130.00
5-7-04	ID# CK# 1006	LeMans Dailey Sentinel 41 1st Ave NE LeMars, Ia 51031	newspaper ad.	\$ 467.40
5-12-04	ID# CK# 1007	KLEM 37 2nd Ave NW LeMars, Ia 51031	Radio ad.	\$ 424.00
	ID# CK#			
SUB-TOTAL				\$ 1,021.40
TOTAL (if last page of this schedule)				\$ 2,515.28

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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).)