

Plymouth

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	17665
Logged In	
Scanned	
Computer	
Audited	

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

Schneider for County 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 John Schneider Political Party (if applicable) Republican

Office Sought County Supervisor P.M. 7.14.04 District (if Senate or House)

Late reports are subject to possible civil and criminal penalties.

Jack E. Brantner
SIGNATURE OF PERSON FILING REPORT

712-546-7811
TELEPHONE

8-14-04
DATE SIGNED

I AM FILING A July 19 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 <u>June 8 2004</u>
County & Local Committees, enter County in which Election is held <u>Plymouth</u>

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.)	\$	<u>789.77</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1000.00</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>
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	<u>1789.77</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....		<u>1770.47</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>19.30</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$	<u>0</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>2.07</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)	\$	_____

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SCHEDULE A (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)
Schneider for County Supervisor

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
5/21/04	ID# CK#	Ronald Geiger 629 Central Av SW LeMars IA	NA	\$ 100 ⁰⁰	<input type="checkbox"/>
5/21/04	ID# CK#	Jeff Hanson 15404 Mesquite Ave LeMars IA	NA	100 ⁰⁰	<input type="checkbox"/>
5/26/04	ID# CK#	Betty Athens 1520 Central Av SE LeMars, IA 57031	NA	100 ⁰⁰	<input type="checkbox"/>
5/27/04	ID# CK#	Gene Collins 38 1st Ave NW LeMars, IA 57031	NA	50 ⁰⁰	<input type="checkbox"/>
5/27/04	ID# CK#	Pat Murphy 1517 1st Av SW LeMars, IA 57031	NA	50 ⁰⁰	<input type="checkbox"/>
5/27/04	ID# CK#	Virgil VanBeek 1548 1st Av SW LeMars, IA 57031	NA	50 ⁰⁰	<input type="checkbox"/>
6/10/04	ID# CK#	John Schneider 12174 Pioneer Av LeMars, IA 57031	Candidate	500 ⁰⁰	<input type="checkbox"/>
7/13/04	ID# CK#	Carol John Schneider 12174 Pioneer Av LeMars, IA 57031	Candidate's Wife	50 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1000 ⁰⁰	
TOTAL (if last page of this schedule)				\$ 1000 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.

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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	

COMMITTEE NAME (Must be same as on Statement of Organization)
Schneider for County 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
5/17/04	ID# CK#	KLEM Radio 37 2 nd Av NW LeMars, IA 57031	Campaign Ads	\$ 406 ⁰⁰
5/24/04	ID# CK#	LeMars Daily Sentinel 41 1 st Av NE LeMars, IA 57031	Campaign Ads	371 ⁹⁴
5/28/04	ID# CK#	Akron Homeowner 30 Reed St Akron, IA 57001	Campaign Ads	51 ⁰⁰
5/28/04	ID# CK#	KLEM Radio 37 2 nd Av NW LeMars, IA 57031	Campaign Ads	84 ⁰⁰
6/09/04	ID# CK#	Remson Bell-Enterprise PO Box 209 Remson, IA 57031	Campaign Ads	15 ⁶⁰
6/09/04	ID# CK#	Red's Printing 410 5 th Av SW LeMars, IA 57031	Yard signs	642 ³⁶
6/08/04	ID# CK#	Akron Register-Tribune 131 Reed St Akron, IA 57001	Campaign Ads	25 ⁵⁰
6/11/04	ID# CK#	LeMars Daily Sentinel 41 1 st Av NE LeMars, IA 57031	Thank you Ad	36 ⁵²

SUB-TOTAL \$ 1632.92

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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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)
Schneider for County 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
6/16/04	ID# CK# 1001	Red's Printing Co 410 5th Ave SW Le Mars, IA 51031	Magnetic signs	\$ 53 ¹⁵
6/16/04	ID# CK# 1002	The Hinton Times 33599 Jade Ave Hinton, IA 51024	Campaign Ads	30 ⁰⁰
7/12/04	ID# CK# 1003	Akron Register Tribune 131 Reed St Akron, IA 51001	Thank you Ad	17 ⁰⁰
7/12/04	ID# CK# 1004	Akron Homeowner 330 Reed St Akron, IA 51031	Thank you Ad	17 ⁰⁰
7/12/04	ID# CK# 1005	Remsen Bell Enterprise PO Box 209 Remsen, IA 51050	Thank you Ad	10 ⁴⁰
7/13/04	ID# CK# 1006	The Hinton Times 33599 Jade Ave Hinton IA 51024	Thank you Ad	10 ⁰⁰
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 137.55
TOTAL (if last page of this schedule) \$ 177.047

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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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)
Schneider for County Supervisor

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
<i>6/08/04</i>	<i>John Schneider 12179 Proven Ave Le Mars IA 51031</i>	<i>candidate</i>	<i>Envelopes from Perkins office</i>	<i>\$ 2.07</i>	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ *2.07*

TOTAL (if last page of this schedule) \$ *2.07*

*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.