File with:
Iowa Ethics and Campaign Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

IA ETHICS AND CAMPAIGN DISCLOSURE BD.

2010 FEB -5 PM 1:26

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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

Pocahontas Co. Republicans

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

(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 _____ Political Party (if applicable) _____

Office Sought _____ District (If Senate or House) _____

FORM **DR-2** (Rev. 07/2007) — DISCLOSURE REPORT

For Office Use Only
Comm. # 9154
Logged in
Scanned
Computer
Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Lisa Sefick — SIGNATURE OF REPORTING REPORT
712-335-3835 — TELEPHONE
Feb. 3, 2010 — DATE SIGNED

I AM FILING A Jan. 19, 2010. (report date) REPORT FOR THE ELECTION (WHICH ELECTION YEAR) Indicate by # 2 - election year.

☐ CHECK IF HUSBAND/WIFE TO REPORT RATER

☐ Check this box if final (termination) report and attach Notice of Dissolution Form DR-3 (You must continue to file reports until a DR-3 is filed.)

Local Committee enter Date of Election _____ County Board of Supervisors Enter Date _____ Which Election is held _____

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.) $ 885.29

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 0.00

Schedule E: Loans Received total (Attach Schedule E) ..... [redacted] (25.)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates Committees Only)

SUB-TOTAL ..... $ 885.29

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (*also see debts and loans below) ..... − 440.71

Schedule F: Loan Repayments total (Attach Schedule F) ..... [redacted] (23)

CASH ON HAND at the end of this reporting period (If first report balance must be zero) $ 444.58 [redacted] (25)

*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) ..... $

CONSULTANT BREAKDOWN (Schedule G Attached.) ____ YES ____ NO

CANDIDATE COMMITTEES ONLY:

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

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Pocahontas Co. Republicans

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN $750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), 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	Y IF FOR FUND-RAISER INCOME
	ID# CK#	No contributions were made from Jan 1, 2009- Dec. 31, 2010 to us.		$	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 0.

TOTAL *(If last page of this schedule)* $ 0

* 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.

Page ____ of ____
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING FORM	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)*

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
1/26/09	ID# CK# #1140.	Pocahontas Rec-Democrat newspaper 218 N. Main St. Pocahontas, IA 50574	Advertising	$24.80
2/8/09.	ID# CK# #1001	Diana Shaw - 341 S. 15th St Laurens, IA - 50554	P.O. Box Rental in Laurens (reimbursement)	$21.00
5/11/09	ID# CK# #1151	Steve Deace WHO Radio Station 1801 Grand Ave Des Moines, IA.	Speaker	$50.00
6/7/09	ID# CK# #1152	Pocahontas Rec-Dem newspaper 218 N. Main St. Pocahontas, IA.	Advertising	$57.60
6/7/09	ID# CK# #1153.	Lisa Setzik 51253 270th Ave Pocahontas, IA 50574.	City Sign (reimbursement) Advertisement for Speaker Steve Deace.	$10.00
7/20/09	ID# CK# #1154.	Wounded Soldiers Benefit. - (Garytall) 521 Sumner Ave Humboldt, IA 50548	To Help w/ expenses for families of wounded or deceased Soldiers)	$260.00
3/4/09	ID# CK# Bank Debit	Laurens State Bank. 1025 3rd St Laurens, IA 50554.	For Check Blanks for our checking acct.	$17.31
	ID# CK#		Total=	$440.71

SUB-TOTAL $ [redacted] (LS)

TOTAL *(If last page of this schedule)* $ [redacted] (LS)

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 personnel/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(j).)

Page _____ of _____

(For Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING 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
	No contributions were made to us from Jan 1, 2009 to Dec 31, 2009			$	☐
					☐
					☐
					☐
					☐
					☐

Total = 0.