Polk

FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE

☑ This is an **initial*** Statement of Organization

☐ This is an **amended*** Statement of Organization

Reset Form

FORM DR-1 (REV 07/2004)	STATEMENT OF ORGANIZATION

For Office Use Only
Comm. # 13464
Indexed DM
Audited
Computer DM

An initial Statement of Organization must be filed within 10 days of the committee's accepting contributions, making expenditures, or incurring indebtedness exceeding $750. Amendments must be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.

MAR 0 7 2005

COMMITTEE NAME
Anderson for City Council

IMPORTANT: Indicate type of committee you are reporting for: 6
(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)Statewide 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

COMMITTEE TREASURER (mandatory for all committees)

Name: James D McFadden, CPA
Mailing Address: 3448 Glenwood Dr
City, State: West Des Moines, IA Zip Code: 50265
Phone: (515) 457-7703
e-Mail: JamesDMcFadden02@yahoo.com

COMMITTEE CHAIR (mandatory except for a candidate's committee)

Name:
Mailing Address:
City, State: Zip Code:
Phone: ( )
e-Mail:

INDICATE PURPOSE OF COMMITTEE – Check One Box ☑ Advocate for/against candidate(s) ☐ Advocate for/against ballot issue(s)

Comment or description:

All Candidates Enter:
Office Sought: West Des Moines City Council, Ward 3
District: Ward 3
Political Party (if applicable): Not Applicable
Year Standing for Election: 2005
County/Local Candidates and Local Ballot/Franchise Committees Enter:
County: Polk
Date of Election: Novembr 8, 2005

Bank Account Name
Anderson for City Council
Name of Financial Institution/type of Account
Iowa State Bank
Mailing Address
3448 Glenwood Dr
City: West Des Moines State: IA Zip: 50265

Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor
Ryan R Anderson
Mailing Address
4805 Tamara Lane
City: West Des Moines State: IA Zip: 50265
Phone (515) 226-0612
e-Mail: AndersonForCityCouncil@gmail.com

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

1. The committee and all persons connected with the committee understand that they are subject to the laws in Iowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the Iowa Administrative Code.

2. That Iowa Code section 68A.402 and rule 351—4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.

3. That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule. A committee filing this statement for purposes of using the shorter "paid for by" and who have not crossed the $750 ch all notify the Board that the $750 threshold will not be crossed.

4. That Iowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.

5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.301 through 68A.303 and rule 351—4.25.

6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed.

James McFadden — Signature of Treasurer — 3/6/05 — Date Signed

Ryan R. Anderson — Signature of Candidate OR for all other committees, Chairperson — 3/6/05 — Date Signed