Polk

FORM DR-1 (Rev. 07/2003)	STATEMENT OF ORGANIZATION

For Office Use Only

Comm. # _____
Indexed _____
Audited _____
Computer _____

FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

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

MAR 11 2004
HD

*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.

COMMITTEE NAME ↓↓
Kiernan For Council

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

COMMITTEE TREASURER (mandatory for all committees)

Name ↓↓ Peter Kiernan
Mailing Address ↓↓ 4109 - 29th Street
City, State ↓↓ Zip Code ↓↓ Des Moines, IA 50310
Phone (515) 270 - 4810
e-Mail

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: Des Moines City Council Candidate

All Candidates Enter:
Office Sought: Des Moines City Council District: At Large
Political Party (if applicable) Democrat Year Standing for Election: 2004
County/Local Candidates and Local Ballot/Franchise Committees Enter:
County: Polk County Date of Election: Primary - April 13 General May 11

Bank Account Name ↓↓
State Federal (checking)
Name of Financial Institution/type of Account ↓↓
4018 University Avenue
Mailing Address ↓↓
Des Moines IA 50311
City ↓↓ State ↓↓ Zip ↓↓

Candidate name & Address or **Parent Entity** (PACs, if applicable), **Affiliate, or Sponsor** ↓↓
Michael Kiernan
Mailing Address ↓↓
750 - 16th Street
City ↓↓ Des Moines State ↓↓ IA Zip ↓↓ 50314
Phone (515) 226 - 9815
e-Mail m.kiernan@mchsi.com

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

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.

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 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.

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.

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.

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.

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.

Signature of Treasurer — Date Signed 3/10/04

Signature of Candidate, OR, for all other committees, Chairperson — Date Signed 3-10-04