

DISCLOSURE SUMMARY PAGE

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Gay Wilson for City 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
 (8)Support Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name Gay Lea Wilson Political Party _____
 Office Sought City Council District (if Senate or House) _____

Jane Anderson
SIGNATURE OF TREASURER (or person filing this report)

515-299-3414
TELEPHONE

OCT 29 2003
HP
10-13-03
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 10/30/03 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 <u>11-4-03</u>
County & Local Committees, enter County in which Election is held <u>Polk</u>

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.) \$ ~~1,375.00~~ 0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1,375.00

Schedule F: Loans Received total (Attach Schedule F)..... 334.98

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 1,709.98

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)... 1,169.02

Schedule F: Loan Repayments total (Attach Schedule F) 334.98

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) \$ 205.98

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ _____

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 101.50

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)..... \$ _____

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 0

For Instructions, See Back of Form

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)

Gay Wilson for City Council

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
		<i>Martha Miller</i>			
<i>8-29-03</i>	ID# (CK#) <i>2320</i>	<i>5230 E. Oakwood Dr. Pleasant Hill, Ia. 50327</i>	<i>Friend</i>	<i>\$100.00</i>	
<i>8-30-03</i>	ID# (CK#) <i>7175</i>	<i>June Anderson 5085 Cleburne Ct. Pleasant Hill, Ia. 50327</i>	<i>Friend</i>	<i>50.00</i>	
<i>9-22-03</i>	ID# CASH CK#	<i>Marc Royer 717 Bainbridge Rd. Goshen, In. 46526</i>	<i>family</i>	<i>300.00</i>	
<i>9-22-03</i>	ID# (CK#) <i>4651</i>	<i>Cindy Smith 4229 E. Thompson Ave. New Mines, Ia. 50317</i>	<i>Friend</i>	<i>25.00</i>	
<i>9-22-03</i>	ID# (CK#) <i>4106</i>	<i>Betty Hyde 1371 NW 141st St. Clive, Ia. 50325</i>	<i>Friend</i>	<i>25.00</i>	
<i>9-22-03</i>	ID# (CK#) <i>1447</i>	<i>Merlin Gamble 1525 Castlegay Ct. Pleasant Hill, Ia. 50327</i>	<i>Friend</i>	<i>25.00</i>	
<i>9-22-03</i>	ID# (CK#) <i>5818</i>	<i>John Town 325 Christie Ln Pleasant Hill, Ia. 50327</i>	<i>Friend</i>	<i>25.00</i>	
<i>9-22-03</i>	ID# (CK#) <i>1117</i>	<i>Joy McCabe 3926 40th St. New Mines, Ia. 50327</i>	<i>family</i>	<i>25.00</i>	
<i>9-22-03</i>	ID# (CK#) <i>3670</i>	<i>Glenna Colyn 9663 SE 20th Ave Russells, Ia. 50337</i>	<i>family</i>	<i>10.00</i>	
<i>9-22-03</i>	ID# (CK#) <i>11519</i>	<i>James Erickson 3818 Thornton Ave DSM, Ia. 50321</i>	<i>Friend</i>	<i>50.00</i>	
SUB-TOTAL				<i>\$635.00</i>	
TOTAL (if last page of this schedule)					
				\$	

* 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.

For Instructions, See Back of Form

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)
Gay Wilson for City Council

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9-22-03	ID# (CK#) 1443	Jake & Erni Neumann 4990 Cypress Drive Pleasant Hill, Ia. 50327	Friend	\$ 50.00	
10-04-03	ID# (CK#) 3905	Dennis & Kelly Sharp 4985 Copper Creek Dr. Pleasant Hill, Ia. 50327	Friend	100.00	
10-4-03	ID# (CK#) 2813	Marc & Susan Ackelson 5525 Schweiker Dr. Pleasant Hill, Ia. 50327	Friend	50.00	
10-4-03	ID# (CK#) 7860	Francis Keith 1505 Castlegar Ct. Pleasant Hill, Ia. 50327	Friend	25.00	
10-4-03	ID# (CK#) 7510	Robert & Riggy Haag 4823 Fairview Pl. Pleasant Hill, Ia. 50327	Friend	25.00	
10-4-03	ID# (CK#) 1772	Deborah Parker 200 Mitchell Ave Mitchellville, Ia. 50169	Friend	15.00	
10-4-03	ID# (CK#) CASH	Diane Wilkins 1540 Castlegar Ct. Pleasant Hill, Ia. 50327	Friend	20.00	
10-8-03	ID# (CK#) 3891	James & Joan O'Boyle 1580 Castlegar Ct. Pleasant Hill, Ia. 50327	Friend	25.00	
10-8-03	ID# (CK#) 10583	Male & Iris Swanson 4990 Ash Dr. Pleasant Hill, Ia. 50327	Friend	20.00	
10-8-03	ID# (CK#) 5064	Mara McKeon-Brown 4714 66th Urbandale, Ia 50322	Friend	50.00	
SUB-TOTAL				\$ 380.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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)

Gay Wilson for City Council

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10-8-03	ID# CK# 3930	Bill & Jeanne Foster 10520 Clark St. Clive, Ia 50325	Friend	\$ 50.00	
10-8-03	ID# CK# 5739	Frank & Bonnie Sloan R.R. 1 Russells, Ia 50237	Friend	100.00	
10-8-03	ID# CK# 5041	Bob Hamilton 7730 Harbach Blvd Clive, Ia. 50325	Friend	25.00	
10-15-03	ID# CK# 5656	James & Carolyn Wilkins 423 Tyler Ave Pleasant Hill, Ia. 50327	Friend	20.00	
10-15-03	ID# CK# CASH	M.E. Tripp 2300 Willowmen Dr. Des Moines, Ia. 50321	Friend	50.00	
10-22-03	ID# CK# 7784	Robert & Heidi Lawson 2079 Lynwood Ct. Johnston, Ia. 50131	family	50.00	
10-22-03	ID# CK# CASH	Deborah Paulsey 2901 Ave. A Council Bluffs, Ia. 51501	Friend	40.00	
10-22-03	ID# CK# 2588	James & Pat Billard 5860 Martin Dr. Pleasant Hill, Ia. 50327	Friend	25.00	
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$ 360.00

TOTAL (if last page of this schedule)

\$ 1375.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

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)

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
9-3-03	ID# CK# 1	Cindy Smith 4229 E. Thompson Ave DSM, Ia. 50317	Stamps	\$ 37.00
9-29-03	ID# CK# 1001	Office Depot 1550 22 ND St. WDSM, Ia. 50265	Office Supplies	121.24
9-30-03	ID# CK# 1002	U. S. Postal Service Bondurant, Ia. 50035	postage stamps	532.80
10/13/03	ID# CK# 1003	PC Signs 2534 Commerce Blvd Cincinnati, OH. 45241	yard signs	334.98
10/28/03	ID# CK# 1004	Office Depot 1550 22 ND St. WDSM, Ia. 50265	office supplies	78.34
10/28/03	ID# CK# 1005	Bath Body Works 1551 Valley W. Dr. WDSM, 50266	Thank you gifts for Campaign Volunteers	64.66
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 1,169.02
 TOTAL (if last page of this schedule) \$ 1,169.02

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.6(3)(i).)

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Gay Wilson for City Council

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ _____

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
10/13/03 9/26/03	<i>Gaylea Wilson</i>	<i>self</i>	\$ <i>334.98</i>

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
<i>10/13/03</i>	<i>Gay Lea Wilson</i>	<i>self</i>	\$ <i>334.98</i>

TOTAL (PART I) \$ *334.98*

TOTAL CASH REPAYMENTS (PART II) \$ *334.98*
 From Schedule E -- TOTAL LOANS FORGIVEN \$ *101.50*
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ ~~*436.48*~~

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