

**DISCLOSURE SUMMARY PAGE**

*Polk*

<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	<u>17036</u>
Logged In	<u>pm</u>
Scanned	
Computer	<u>pm</u>
Audited	

Late reports are subject to possible civil and criminal penalties.

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

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: Tom Hockensmith Political Party (if applicable): Democrat  
Office Sought: Polk County Supervisor District (if Senate or House):  
*FILED ON 1-12-05*

JAN 13 2005

*Julie Kay Lewis*  
SIGNATURE OF PERSON FILING REPORT

515 2631804  
TELEPHONE

1-11-05  
DATE SIGNED

I AM FILING A 12-31-04 REPORT FOR (1) ELECTION //(2) NON-ELECTION YEAR.  
(report date) Indicate by # 2

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 \_\_\_\_\_  
County & Local Committees, enter County in which Election is held Polk

**STATEMENT OF CASH ON HAND**

<b>CASH ON HAND</b> at the beginning of the reporting period. (Total of all funds held by the committee. This amount <b>MUST</b> 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>910336</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>13655.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>—</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>—</u>
<b>(Schedule H applies to Candidates' Committees Only)</b>		
	<b>SUB-TOTAL .....</b>	<b>\$</b> <u>2275836</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>7376.27</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>—</u>
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>15382.09</u>
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$	<u>—</u>
<b>**IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$	<u>9460</u>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$	<u>—</u>
<b>CANDIDATE COMMITTEES ONLY:</b>		
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$	<u>—</u>

For Instructions, See Back of Form

SCHEDULE <b>A</b> (Rev. 06/97)	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)

Hockensmith for 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/YY)	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
6/18/04	ID# CK#	George Cataldo 5554 NE 16th St Des Moines IA 50313		\$ 25000	✓
6/26/04	ID# CK#	Deborah Babo 1660 Copper Creek Ct Pleasant Hill Ia 50237		100.00	✓
6/26/04	ID# CK#	Bethy Brem - dentist 452 Wilmer Ave Des Moines IA 50315		2500	✓
6/26/04	ID# 6248 CK# 1108	AFCM 1808 ROAKE 2nd Court Court 100 Des Moines IA 50309		250.00	✓
6/26/04	ID# CK#	Mike Uebe 3311 E Aurora Des Moines IA 50317		80.00	✓
7/2/04	ID# CK#	William Knapp 5221 NW 7th Pl Johnston IA 50131		250.00	✓
7/7/04	ID# CK#	Thomas Flynn 200 Financial Center Des Moines IA 50309		250.00	✓
7/7/04	ID# CK#	David Hurd 300 Walnut #183 Des Moines IA 50309		25000	✓
7/7/04	ID# CK#	James Murphy 1925 0t 52nd St Des Moines IA 50237		25000	✓
7/7/04	ID# CK#	Larry Land 6048 Terrace Dr Johnston IA 50131		25000	✓

SUB-TOTAL

\$195500

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) (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.

For Instructions, See Back of Form

SCHEDULE <b>A</b> (Rev. 06/97)	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)  
*Hockensmith for 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/YY)	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
7/7/04	ID# CK#	Vicki Ligouri 1611 NW 10th St Des Moines IA 50325-6612		\$ 25000	✓
7/7/04	ID# CK#	Maggie Moss 2935 Calmar Des Moines IA 50312		25000	✓
7/8/04	ID# CK#	Joseph Aiello 3700 Walcott Des Moines IA 50321		20000	✓
7/8/04	ID# CK#	Donald Simmons 8109 NE 5th Ave Altona IA 50009		25000	✓
7/8/04	ID# CK#	Brian Sims 1155 13th Ave Newton IA 50208		2500	✓
7/13/04	ID# CK#	Janice Sears 1795 Waters Edge Dr Pleasant Hill IA 50377		25000	✓
7/13/04	ID# CK#	John Fabno 673 20th Des Moines IA 50314		25000	✓
7/13/04	ID# CK#	Richard Margulies 2100 Westown Plwy #220 W Des Moines IA 50345		25000	✓
7/13/04	ID# CK#	Martha Miller 5230 E Oakland Dr Pleasant Hill IA 50377		10000	✓
7/13/04	ID# CK#	Kurt Barber 11036 NE 5th Ave Mitchellville IA 50169-9522		25000	✓
SUB-TOTAL				207500	

TOTAL (if last page of this schedule)

\$ 207500

\* 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) (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.

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 Hockensmith for 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/YY)	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
7/13/04	ID# CK#	Gary Palmer 6707 NE 64th Dubuque IA 50009		\$ 2500	✓
7/13/04	ID# CK#	Michael Freeling PO Box 93003 Des Moines IA 50393		2500	✓
7/13/04	ID# 7310 CK# 3123	Central Iowa Building and Construction Trades Local PAC PO Box 7310 Des Moines IA 50309		2500	✓
7/13/04	ID# CK# 1188	Plumbers & Pipefitters PAC Local 33 2501 Bell Des Moines, 50321		2500	✓
7/14/04	ID# CK#	Mark London 7131 El Rancho London Heights IA 50322		10000	✓
7/15/04	ID# CK#	Julia Lay Lewis 1816 E 22nd Des Moines IA 50317		2500	✓
7/15/04	ID# CK#	James Cowhrie 141 37th Des Moines IA 50312		2500	✓
7/15/04	ID# CK#	Delmo Piagentini 2917 ML King Pkwy Des Moines IA 50314		2500	✓
7/17/04	ID# CK#	Jennifer Galloway 3515 1/2 4th St Urbandale IA 50323		2500	✓
7/19/04	ID# CK#	Kurt Kasnussen 6870115 Beaver Pl Ishamton IA 50131		2500	✓
SUB-TOTAL				\$ 235000	
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) (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.

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Hockensmith for 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/YY)	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
7/17/04	ID# 6133 CK# 953	50 Central St Federating Labor Citizenship Fund 300 E Coe St #100 Des Moines IA 50309		\$ 25000	✓
7/19/04	ID# CK#	Timothy Cook 3585 Schwaner Dr Pleasant Hill IA 50827		250.00	✓
7/20/04	ID# CK#	James Gauger 307 Hwy 102 West Ankeny IA 50021		25000	✓
7/21/04	ID# CK#	Lore Leo 4101 Walnut Des Moines IA 50321		10.00	✓
7/21/04	ID# CK#	Ronda Franz 3955 NE 45th Dr Des Moines IA 50317		1000	✓
7/21/04	ID# CK#	Jim Pike 1594 St 68th Ave Atona IA 50009		10.00	✓
7/21/04	ID# CK#	Sam Allgren 389 Sherry Lynn Blvd Pleasant Hill IA 50327		2500	✓
7/21/04	ID# CK#	Laudale Overman 3011 Mansfield Dr Des Moines IA 50317-4015	Mother-in-law	5000	✓
7/21/04	ID# CK#	David Williamson 1595 SE 82nd St Lunnville IA 50237		25000	✓
7/21/04	ID# CK#	Mark Hedberg 2324 E 2nd St Des Moines IA 50317		25000	✓
SUB-TOTAL				\$135500	
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) (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.

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Hockensmith for 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
7/21/04	ID# CK#	Larry Noble 3311 E Aurora Des Moines IA 50317		\$ 500.00	✓
7/21/04	ID# CK#	Lida Turner 3515 E 43rd Ct Des Moines IA 50317		5000	✓
7/22/04	ID# CK#	Bill Peters 1900 1/2 McKinley Des Moines IA 50315		2500	✓
7/24/04	ID# CK#	Connie Wiestlander 305 Mell St Mitchellville IA 50109		2500	✓
7/24/04	ID# CK#	Thomas Henderson 6239 N Willowood Dr Johnston IA 50131		1500	✓
7/24/04	ID# CK#	David Hibbard 1042 Budget Creek Rd Van Meter IA 50261		200.00	✓
7/24/04	ID# CK#	Dick Dearden 3113 Kinsey Des Moines IA 50317		2500	✓
7/24/04	ID# CK#	Donald Rowan 347 Crocker Des Moines IA 50312		2500	✓
7/24/04	ID# CK#	Jan Whitney 660 Grand # 1800 Des Moines IA 50309		25000	✓
7/24/04	ID# CK#	John Fathno 672 20th St Des Moines IA 50314		500	✓
SUB-TOTAL				\$1525.00	
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) (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.

For Instructions, See Back of Form

SCHEDULE <b>A</b> (Rev. 06/97)	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)

Hockensmith for 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/YY)	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
7/24/04	ID# CK#	Jon Lowen 1414 8th Ave SE Altoona IA 50009		\$ 100.00	✓
7/24/04	ID# CK#	Lee Olsen 2635 Lebbell Ave Des Moines IA 50317		2500	✓
7/24/04	ID# CK#	Brenda Pison 9280 NE BASLINE DR Waukee IA 50257		5000	✓
7/24/04	ID# CK#	Sam Breat 3919 Hubbardale Des Moines IA 50310-4019		100.00	✓
7/24/04	ID# CK#	Robert Bradley Skennel 1810 Andrew Dr Pleasant Hill IA 50327		500.00	✓
7/24/04	ID# CK#	Lois Skennel Box 307 Altoona IA 50009		2000.00	✓
7/24/04	ID# CK#	Dick & Nancy Heidrich 2432 E Hill Des Moines IA 50312		2500	✓
7/24/04	ID# CK#	Pamela Appleby 1321 E 27th St Des Moines IA 50317		100.00	✓
7/24/04	ID# CK#	Ed Wieslander 413 Mill St Mitchellville Des Moines IA 50105		100.00	✓
7/24/04	ID# CK#	Don Bertaini 306 St Parkview Dr Ankeny IA 50021		10.00	✓

SUB-TOTAL

\$3010.00

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) (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.

For Instructions, See Back of Form

SCHEDULE <b>A</b> (Rev. 06/97)	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)

Hockensmith for 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
7/24/04	ID# CK#	Randy Steinbach 8858 NE 9th Ave Bondurant, IA 50035		\$ 2000	✓
7/24/04	ID# CK#	Kenny Harrison 24131 E 38th Des Moines, IA 50317		2000	✓
7/24/04	ID# CK#	Bob Owens 13577 NE Spawst Elkhart IA 50073		1000	✓
7/24/04	ID# CK#	Connie Ewing RR 3 Box 465 Leon IA 50044		1000	✓
7/24/04	ID# CK#	Dennis Johnson 135 Pathway St Bondurant, IA 50035		2000	✓
7/24/04	ID# CK#	Mike Hall 4160 SE 9th St Bunnells IA 50037		1000	✓
7/24/04	ID# CK#	Rich Hart 670 Veterans Memorial Dr Carlisle IA		200.00	✓
7/24/04	ID# CK#	Aaron & Brandi Jackson 15506 Garrett Dr Bunnells IA 50037		2500	✓
7/24/04	ID# CK#	Gene & Carolyn Hockensmith 2718 Tippin Des Moines IA 50317	Mom & Dad	2500	✓
7/24/04	ID# CK#	Paul Johnson 14 Cabot Ave #100 Des Moines IA 50305	1st	10.00	
SUB-TOTAL				\$350.00	
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) (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.

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Hockensmith for 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/YY)	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
7/24/14	ID# CK#	Lee Thielman 2266 NW 71st Pl Ankeny IA 50021		\$ 2500	✓
7/24/14	ID# CK#	Michael & Theresa Kern 4480 NE 34th Des Moines IA 50317		2500	✓
7/24/14	ID# CK#	Jan & Kay Tharp 6813 Timberwolf Lane Des Moines IA		2500	✓
7/24/14	ID# CK#	Ken & Holly Sager 4018 E 24th Ct Des Moines IA 50317		2500	✓
7/24/14	ID# CK#	Skip & Jeanne Conkle 506 Oak St NW Altoona IA 50009		100.00	✓
7/24/14	ID# CK#	Vaughn Lewis 4507 Marquette Lane Des Moines IA 50315		5000	✓
7/24/14	ID# CK#	Unitemized Contribution		3000	✓
8/2/14	ID# CK#	Sam Hedges 1194 NW 10th Ave Des Moines IA 50313		2500	✓
8/22/14	ID# CK#	Linda Westgaard 4005 E 23rd Des Moines IA 50317		50.00	✓
8/23/14	ID# CK#	Timothy Mallicoat 5205 Oakmont Dr Pleasant Hill IA 50317		250.00	✓
SUB-TOTAL				\$60500	
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) (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.

For Instructions, See Back of Form

**CONTRIBUTIONS – MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Hockensmith for 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
8/9/04	ID# CK#	Gale Young 4389 NE 35th Des Moines IA 50317	100.00	\$	✓
8/23/04	ID# CK#	Martin W. Isom 1550 Castleside Ct Des Moines IA 50327	2500		✓
8/25/04	ID# CK#	John Craig 2218 Maple Hayes #18 Des Moines IA 50310	50.00		
8/25/04	ID# CK#	Danny Brown 3000 Ischaek St Des Moines IA 50315	50.00		
8/27/04	ID# 6485 CK# 1033	Krause Gentle Corp. Inc 640 Westmountain Des Moines IA 50366	100.00		✓
8/27/04	ID# CK#	Unitemized Contributions	40.00		
11/4/04	ID# CK#	Jim Cockarham 3936 E 26th Des Moines IA 50317	10.00		✓
11/4/04	ID# CK#	Gooding Larry 4007 NE 46th Ave Des Moines IA 50317	100.00		✓
11/4/04	ID# CK#	Gookin Sue 4035 Imation Des Moines IA 50317	100.00		✓
11/4/04	ID# CK#	Glenn R. Huddleston 301 De Astor Ankeny IA 50021	25.00		✓
SUB-TOTAL				\$ 420.00	
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) (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.



FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	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)  
*Hockensmith for 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
11/14/04	ID# CK#	AFSCME Co 61 4320 NW 2nd Ave Des Moines IA 50319	postage christmas cards 107 237	\$6179.
11/14/04	ID# CK#	POIK Co Auditor 120 2nd Ave #A Des Moines IA 50308	check - new volunteer	1500
3/7/04	ID# CK#	Center Printing 1739 E Grand Des Moines 50316	110 envelopes letterhead	13568
3/7/04	ID# CK#	AFSCME Council 61 4320 NW 2nd Ave Des Moines IA 50313	new voter letter postage 626 037	23162
4/19/04	ID# CK#	Plakodem Photo 4529 Douglas Ave Des Moines 50310	1 8x10 4 4x5 press photos	8904
5/18/04	ID# CK#	AFSCME Council 61 4320 NW 2nd Ave Des Moines IA 50313	new voter letter postage 720 06 374	26640.
5/23/04	ID# CK#	POIK Co Conservation 11407 NW Jackson Orange IA 50109	key deposit shelter	10000
5/23/04	ID# CK#	POIK Co Conservation 11407 NW Jackson Orange IA 50109	shelter rental Shom's Michael pub	5000.
SUB-TOTAL				\$ 949.53
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 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	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)  
*Hockensmith for 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
6/18/04	ID# CK#	<i>Carton Printing 1739 E Grand Des Moines IA 50317</i>	<i>fund raiser tickets</i>	<i>\$154.76</i>
6/22/04	ID# CK#	<i>Tom Hockensmith 3502 E 43rd St Des Moines IA 50317</i>	<i>other desk reimbursement</i>	<i>5.00</i>
7/7/04	ID# CK#	<i>Studio of Lacey Anderson 1427 SW Army Blvd Des Moines, IA 50321</i>	<i>1 sheet form core</i>	<i>8.44</i>
6/30/04	ID# CK#	<i>Community State Bank 1401 E Grand 50313</i>	<i>Interest</i>	<i>2.90</i>
7/15/04	ID# CK#	<i>Carton Printing 1739 E Grand Des Moines IA 50316</i>	<i>letter head &amp; envelopes 1000</i>	<i>146.28</i>
7/16/04	ID# CK#	<i>AFCM - Larnal 61 4300 Howard Ave Des Moines IA 50313</i>	<i>New voter letters postage 722 @ .37</i>	<i>267.14</i>
7/24/04	ID# CK#	<i>Dick Budnell 2433 E Hull Des Moines IA 50317</i>	<i>Buns &amp; hot dogs fundraiser</i>	<i>54.10</i>
7/24/04	ID# CK#	<i>CAOSM &amp; Sons Meats 3407 Alameda Des Moines IA 50317</i>	<i>hamburger patties fundraiser</i>	<i>136.08</i>
SUB-TOTAL				<i>\$ 770.90</i>
TOTAL (if last page of this schedule)				<i>\$</i>

**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 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE</b> <b>B</b> (Rev. 09/97)	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)  
*Hockensmith for 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
7/15/04	ID# CK#	Larry Nisla 3311 E Aurora Des Moines IA 50317	Reg for fundraiser	\$9256
7/26/04	ID# CK#	Amanda Tyler 111 Court #100 Des Moines IA 50308	Pop, Bopaware chips, fundraiser	18350
7/30/04	ID# CK#	Community State Bank 1401 E Euclid 50313	check order	16.10
7/30/04	ID# CK#	Community State Bank 1401 E Euclid 50313	sales tax	.02
7/30/04	ID# CK#	Community State Bank 1401 E Euclid 50313	service charge	.54
7/30/04	ID# CK#	Community State Bank 1401 E Euclid 50313	interest	2.017
8/5/04	ID# CK#	Polk Co Conservation 11407 Nageston Granger IA 50109	stake deposit refrain	2100.007
8/5/04	ID# CK#	Asst Int Council of 4320 Hwy and the Des Moines IA 50313	postage 46¢ 37 Thank you - Fundraiser	17.02
SUB-TOTAL				\$207.74
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 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	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)  
*Hockensmith for 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
8/25/04	ID# CK#	Polk Co Democrat PO Box 5102 Des Moines 50306	Party Contribution	\$ 1000.00
9/2/04	ID# CK#	Blaine Shirt Shop 2006 E Grand Des Moines 50317	t-shirts	30.00
8/31/04	ID# CK#	Community State Bank 1401 E Euclid 50313	Interest	(35.67)
9/9/04	ID# CK#	Garry Welman 3011 Mansfield Des Moines 50317	Candy for parade	74.16
9/2/04	ID# CK#	Garry Welman 3011 Mansfield Des Moines 50317	Candy streamer part parade	40.10
9/2/04	ID# CK#	Blaine Shirt Shop 2006 E Grand Des Moines 50317	t-shirts	131.44
9/30/04	ID# CK#	Community State Bank 1401 E Euclid 50313	service charge	.01
9/30/04	ID# CK#	Community State Bank 1401 E Euclid 50313	Interest	(3.25)
SUB-TOTAL				\$ 1268.96
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 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> 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)  
*Hockensmith for 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
10/3/04	ID# CK#	Iowa Democratic Party 5001 Fulton St. 50321	Party Contribution	\$500.00
10/11/04	ID# CK#	Iowa Democratic Party 5001 Fulton St. 50321	Party Contribution	300.00
10/29/04	ID# CK#	Community State Bank 1401 Euclid 50313	Interest	13017
11/15/04	ID# CK#	Greg Lewis 1816 E 2nd Des Moines IA 50317	printer cartridge	35.29
11/15/04	ID# CK#	Cartier Printing 1739 E Grand Des Moines 50314	letter head envelopes	268.45
11/15/04	ID# CK#	Polk Co Auditor 130 2nd Ave Des Moines 50305	New John desk	3200
11/22/04	ID# CK#	Afscme Council 601 4320 NW 2nd Ave Des Moines IA 50313	postage	792.91
12/18/04	ID# CK#	Direct Marketing 2130 Delaware Des Moines IA 50317	postage permit	510.49
SUB-TOTAL				\$ 2430.13
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 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> 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)  
*Hockensmith for 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
12/9/04	ID# CK#	<i>Carte Printing 1739 E Grand Des Moines 50316</i>	<i>Christmas cards envelopes</i>	<i>\$1284.72</i>
12/15/04	ID# CK#	<i>Tom Hockensmith 3502 E 43rd St Des Moines IA 50327</i>	<i>postage</i>	<i>59.00</i>
11/30/04	ID# CK#	<i>Community State Bank 1401 E Euclid 50312</i>	<i>Interest</i>	<i>23.267</i>
10/10/04	ID# CK#	<i>Direct Marketing 2130 Delaware Des Moines IA 50317</i>	<i>postage mail service</i>	<i>246.11</i>
12/10/04	ID# CK#	<i>Carte Printing 1739 E Grand Des Moines 50316</i>	<i>envelopes</i>	<i>159.00</i>
12/31/04	ID# CK#	<i>Community State Bank 1401 E Euclid 50312</i>	<i>Interest</i>	<i>22.797</i>
11/30/04	ID# CK#	<i>Community State Bank 1401 E Euclid 50312</i>	<i>service charge</i>	<i>.02</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 1743.09</i>
TOTAL (if last page of this schedule)				<i>\$ 7276.07</i>

**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 56.6(3)(i).)

