

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

Polk

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	17340
Logged In	sb
Scanned	
Computer	sb
Audited	

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

COMMITTEE TO ELECT MICHAEL A. MAURO

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

CANDIDATE COMMITTEES ONLY:

Candidate Name	Political Party
MICHAEL A. MAURO	DEMOCRAT
Office Sought	District (if Senate or House)
POLK COUNTY AUDITOR	

ETHICS & CAMPAIGN DISCLOSURE BOARD

MAY 17 2004

FILED

5/17/04

DATE SIGNED

Pamela K Konner

SIGNATURE OF TREASURER (or person filing this report)

266-6895

TELEPHONE

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A MAY 19, 2004 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 _____

County & Local Committees, enter County in which Election is held _____

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.)	\$ 23,217.80
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	3,615.00
Schedule F: Loans Received total (Attach Schedule F)	
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ 26,832.80
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	1,035.47
Schedule F: Loan Repayments total (Attach Schedule F)	
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$ 25,797.33

****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) \$ _____

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

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

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SCHEDULE A (Rev. 07/03)	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)
COMMITTEE TO ELECT MICHAEL A. MAURO

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
01-02-04	ID# CK#	KEITH OLSON 3509 SW 44TH ST. DM, IA 50321		\$ 250.00	<input type="checkbox"/>
01-02-04	ID# CK#	JAMES FITZGERALD 3036 E. DIEHL AVE. DM, IA 50320		200.00	<input type="checkbox"/>
02-04-04	ID# CK#	KEN AGEY 3121 SW 32ND PL DM, IA 50321		250.00	<input type="checkbox"/>
02-04-04	ID# CK#	KEITH OLSON 3409 SW 44TH ST. DM, IA 53021		250.00	<input type="checkbox"/>
02-23-04	ID# 6248 CK# 1104	AFSCME EMPLOYEES LOCAL 1868 PAC 2ND & COURT ROOM 100 DM, IA 50309		250.00	<input type="checkbox"/>
02-27-04	ID# CK#	MARK ROCHA 2316 HILLSIDE AVE. WDM, IA 50265		15.00	<input type="checkbox"/>
03-02-04	ID# CK#	SCIFL 2000 WALKER DM, IA 50317		100.00	<input type="checkbox"/>
03-18-04	ID# CK#	FRANK SEVERINO 4401 - 75TH ST. DM, IA 50322		100.00	<input type="checkbox"/>
03-18-04	ID# CK#	CONNIE WIMER 100 - 4TH ST. DM, IA 50309		100.00	<input type="checkbox"/>
03-18-04	ID# CK#	HAROLD BELKEN 416 SE GRAY ST. DM, IA 50315		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1615.00	
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). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT MICHAEL A. MAURO

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03-18-04	ID# CK#	MARLO GILLOTTI 1129 BURR OAKS DRIVE WDM, IA 50266		\$ 50.00	<input type="checkbox"/>
03-18-04	ID# CK#	ART HEDBERG 1716 E. 31ST CT. DM, IA 50317		50.00	<input type="checkbox"/>
03-18-04	ID# CK#	HARRY BOOKEY 400 LOCUST ST. SUITE 790 DM, IA 50309		50.00	<input type="checkbox"/>
03-29-04	ID# CK#	MRS. CHARLES COLOSIMO 806 MAISH AVE. DM, IA 50315		25.00	<input type="checkbox"/>
03-29-04	ID# CK#	JONATHAN WILSON 2924 DRUID HILL DR. DM, IA 53015		50.00	<input type="checkbox"/>
03-29-04	ID# CK#	JAMES W. CARNEY 303 LOCUST ST. DM, IA 50309		50.00	<input type="checkbox"/>
03-29-04	ID# CK#	CENTRAL IA BLDG & CONST. TRADES COUNCIL PAC COMM P.O. BOX. 7310		100.00	<input type="checkbox"/>
03-29-04	ID# CK#	MICHAEL A. COPPOLA 4521 FLEUR DR. SUITE C DES MOINES, IA 50321		200.00	<input type="checkbox"/>
03-29-04	ID# CK#	JAMES S. COWNIE 141 - 37TH ST. DES MOINES, IA 50312		250.00	<input type="checkbox"/>
03-29-04	ID# CK#	MICHAEL O'MALLEY 3919 SHERMAN BLVD DM, IA 50310		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1,025.00	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT MICHAEL A. MAURO

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.

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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
03-30-04	ID# CK#	DEL PIAGENTINI 8021 GARRISON RD CLIVE, IA 50325		\$ 200.00	<input type="checkbox"/>
04-01-04	ID# CK#	CONNIE BOESEN 3011 DON LEE CT DM, IA 50317		25.00	<input type="checkbox"/>
04-06-04	ID# CK#	ANTONIO COLACINO 4645 ELM ST WDM, IA 50265		50.00	<input type="checkbox"/>
04-13-04	ID# CK#	BRICE OAKLEY 418 38TH PL DM, IA 50312		100.00	<input type="checkbox"/>
04-19-04	ID# CK#	JARED JOHNSON 12035 UNIVERSITY AVE. SUITE 101 CLIVE, IA 50325		500.00	<input type="checkbox"/>
04-19-04	ID# CK#	ERIC WITHERSPOON 5120 WELKER AVE. DM, IA 50312		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 975.00	
TOTAL (if last page of this schedule)				\$ 3615.00	

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" 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)
COMMITTEE TO ELECT MICHAEL A. MAURO

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
01-09-04	ID# CK#	BARATTAS 2320 SO. UNION DM,IA	POLK COUNTY DEMOCRATS LUNCHEON	\$ 22.14
01-13-04	ID# CK#	CARTER PRINTING 1739 E. GRAND AVE. DM, IA 50316	PRINTING NOMINATION PAPERS	42.40
02-06-04	ID# CK#	POSTMASTER 1165 2ND AVE. DM,IA 50309	POSTAGE	74.00
02-06-04	ID# CK#	LATIN KING 2200 HUBBELL AVE. DM, IA 50317	CAMPAIGN MEETING	35.60
03-10-04	ID# CK#	CARTER PRINTING 1739 E. GRAND AVE. DM,IA 50316	PRINTING COWBOY CARDS	61.48
03-10-04	ID# CK#	POSTMASTER 1165 2ND AVE. DM, IA 50309	POSTAGE	74.00
03-30-04	ID# CK#	ST. ANTHONY'S RESTORATION 15 INDIANOLA AVE. DM,IA 50315	CONTRIBUTION	100.00
04-02-04	ID# CK#	IOWA HOUSE TRUMAN FUND 5661 FLEUR DR. DM, IA 53021	CONTRIBUTION	50.00
SUB-TOTAL				\$ 459.62
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 68A.402(3)(i).)

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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)
COMMITTEE TO ELECT MICHAEL A. MAURO

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
04-02-04	ID# CK#	LATIN KING 2200 HUBBELL AVE. DM,IA 50317	POLK COUNTY DEMOCRATS LUNCHEON	\$ 15.58
04-20-04	ID# CK#	LATIN KING 2200 HUBBELL AVE. DM,IA 50317	CAMPAIGN MEETING	52.63
04-21-04	ID# CK#	MICHAEL A. MAURO 4325 SW 31ST DM,IA	REIMBURSE FOR REFRESHMENTS FOR MEETING	26.64
05-06-04	ID# CK#	POSTMASTER 1165 2ND AVE DM, IA 50309	POSTAGE	231.00
05-13-04	ID# CK#	POLK COUNTY DEMOCRATS 5661 FLEUR DR DM,IA 50321	CONTRIBUTION	250.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 575.80
TOTAL (if last page of this schedule)				\$ 1035.47

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.402(3)(i).)