

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE 4 2003

Polk

S

COMMITTEE NAME (Must be same as on Statement of Organization)
 Marc Ward for School Board ND

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 Marc Ward	Political Party _____
Office Sought Des Moines School Board	District (if Senate or House) _____

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>11078</u>
Logged In	<u>sb</u>
Scanned	<u>9.5.03</u>
Computer	<u>sb</u>
Audited	<u>sb</u>

[Signature] (515) 327-0024 9/4/03
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE 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 9/4/2003 election REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.
(report date)

Indicate one

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>9/9/03</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.)\$ 10,069.54 ✓

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1,915.00 ✓

Schedule F: Loans Received total (Attach Schedule F)

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

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL\$ 11,984.54

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 10,975.59 ✓

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).....\$ 1,008.95 ✓

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

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ 116.98 ✓

**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) \$ _____

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)

Marc Ward for School Board

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
8/26/03	ID# CK#	Philip Roeder and Mary Tabor 110 Lincoln Place Drive Des Moines, IA 50312		\$ 100.00	<input type="checkbox"/>
8/22/03	ID# CK#	John J. and Jody B. Clarke 5050 Grand Avenue West Des Moines, IA 50265		50.00	<input type="checkbox"/>
8/8/03	ID# CK#	Todd Elverson and Denise Horner 752 - 52nd Street Des Moines, IA 50312		50.00	<input type="checkbox"/>
8/11/03	ID# CK#	Charles M. Schneider 921 West 18th Street South Newton, IA 50208		25.00	<input type="checkbox"/>
8/11/03	ID# CK#	Michael C. or Deborah S. Hubbell 3717 Lincoln Place Drive Des Moines IA 50312		100.00	<input type="checkbox"/>
8/10/03	ID# CK#	Richard Koch, Jr. 5506 Woodland Avenue Des Moines, IA 50312-1950		25.00	<input type="checkbox"/>
8/6/03	ID# CK#	John L. Fisher and Jann E. Freed 629 Polk Boulevard Des Moines, IA 50312		50.00	<input type="checkbox"/>
8/6/03	ID# CK#	Krista K. Tamer 1654 N.W. 129th Street Clive, IA 50325		75.00	<input type="checkbox"/>
8/3/03	ID# CK#	John D. and Caroline V. Barzen 3300 Crestmoor Place Des Moines, IA 50310		25.00	<input type="checkbox"/>
8/4/03	ID# CK#	Diane L. Foss 6608 Del Matro Avenue Des Moines, IA 50311		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 550.00	
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.

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)

Marc Ward for School Board

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8/4/03	ID# CK#	Louis R. and Mary K. Roth 666 - 50th Street Des Moines, IA 50312		\$ 50.00	<input type="checkbox"/>
8/4/03	ID# CK#	David R. and Tamara A. Stroh 5500 Grand Avenue Des Moines, IA 50312		100.00	<input type="checkbox"/>
7/27/03	ID# CK#	Joseph H. Jongewaard 4039 Ovid Des Moines, IA 50310		30.00	<input type="checkbox"/>
7/27/03	ID# CK#	Connie Cook 1301 - 24th Des Moines, IA 50311		50.00	<input type="checkbox"/>
8/3/03	ID# CK#	Gregg and Leisha Barcus 4930 Country Club Boulevard Des Moines, IA 50312		100.00	<input type="checkbox"/>
7/27/03	ID# CK#	Donald L. Gloo and Julia A. Oas 5241 Woodland Avenue Des Moines, IA 50312		25.00	<input type="checkbox"/>
7/25/03	ID# CK#	John D. and Jennifer Hilmes 5115 Woodland Avenue Des Moines, IA 50312		100.00	<input type="checkbox"/>
7/25/03	ID# CK#	Timothy McCarthy II 1701 - 48th Street West Des Moines, IA 50266		50.00	<input type="checkbox"/>
7/23/03	ID# CK#	Kimberley K and Scott Runyon 212 - 49th Street Des Moines, IA 50312		125.00	<input type="checkbox"/>
7/22/03	ID# CK#	Tom and Sarah Norman 5814 Walnut Hill Avenue Des Moines, IA 50312-1435		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 680.00	
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)

Marc Ward for School Board

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
7/22/03	ID# CK#	Thurman and Mary Connell 5010 Woodland Avenue Des Moines, IA 50312		\$ 50.00	<input type="checkbox"/>
7/22/03	ID# CK#	Richard and Robbie Malm 5812 N. Waterbury Des Moines, IA 50312-1340		100.00	<input type="checkbox"/>
7/22/03	ID# CK#	Valentina Fominykh 118 Northwood Road Des Moines, IA 50312-4432		50.00	<input checked="" type="checkbox"/>
7/22/03	ID# CK#	Elaine Syzmoniak 2116 - 44th Street Des Moines, IA 50310		25.00	<input checked="" type="checkbox"/>
7/22/03	ID# CK#	Theresa H. Lewis 52 - 30th Street Des Moines, IA 50312		50.00	<input checked="" type="checkbox"/>
7/22/03	ID# CK#	Somphong Baccam 4007 S.E. 27th Street Des Moines, IA 50320		25.00	<input checked="" type="checkbox"/>
7/22/03	ID# CK#	Judith McCoy Davis 2880 Grand Avenue, No. 304 Des Moines, IA 50312-4274		25.00	<input checked="" type="checkbox"/>
7/22/03	ID# CK#	Mary C. Gottschalk 416 - 49th Street Des Moines, IA 50312		10.00	<input checked="" type="checkbox"/>
8/28/03	ID# CK#	Suzanne and John Wetherell 655 - 49th Street Des Moines, IA 50312-1952		50.00	<input type="checkbox"/>
8/28/03	ID# CK#	James O. Boyt 6700 Carpenter Des Moines, IA 50311		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 485.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



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)

Marc Ward for School Board

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
8/31/03	ID# CK#	Siobham and William Workman 217 Tonawanda Drive Des Moines, IA 50312-2827		\$ 75.00	<input type="checkbox"/>
8/26/03	ID# CK#	Jill and Patrick Moran 6615 Sunset Terrace Des Moines, IA 50311		100.00	<input type="checkbox"/>
9/2/03	ID# CK#	Arnis and Betty Grundberg 224 Foster Drive Des Moines, IA 50312		25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<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

\$ 200.00

TOTAL (if last page of this schedule)

\$1,915.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset 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)

Marc Ward for School Board

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
8/14/03	ID# CK# 1026	Carter Printing	Printing	1,878.32 \$
8/20/03	ID# CK# 1027	United States Postal Service	Postage	3,967.12
8/20/03	ID# CK# 1028	Mailtech	Direct mail services	788.41
8/27/03	ID# CK# 1029	Carter Printing	Yard signs	2,048.45
9/2/03	ID# CK# 1030	United States Postal Service	Postage	1,163.73
9/2/03	ID# CK# 1031	Mailtech	Direct mail services	334.56
9/3/03	ID# CK# 1032	Carter Printing	Printing	795.00
	ID# CK#			
SUB-TOTAL				\$10,975.59
TOTAL (if last page of this schedule)				\$10,975.59

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
 Marc Ward for School Board



DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
7/21/03	Laura Sands 2922 - 37th Street Des Moines, IA 50310		Food and beverage	\$ 61.98	<input checked="" type="checkbox"/>
7/21/03	Jacquie Easley 3113 Southern Hills Drive Des Moines, IA 50321		Food and beverage	40.00	<input checked="" type="checkbox"/>
7/21/03	Mary Gottschalk 416 - 49th Street Des Moines, IA 50312		Food and beverage	15.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$	116.98
TOTAL (if last page of this schedule)				\$	116.98 ✓

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.