

FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

- This is an **initial*** Statement of Organization
- This is an **amended*** Statement of Organization

**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.*



FORM DR-1 (Rev. 07/2003)	STATEMENT OF ORGANIZATION
For Office Use Only	
Comm. # _____	
Indexed _____	
Audited _____	
Computer _____	

COMMITTEE NAME ↓ ↓ Committee to Re-Elect Mark Peterson 2003	AUG 8 2003
4	
IMPORTANT: Indicate type of committee you are reporting for: (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 ↓ ↓ Ron Tekippe Mailing Address ↓ ↓ 5 Horizon Drive City, State ↓ ↓ Zip Code ↓ ↓ Council Bluffs, Iowa 51503 Phone (712) 328-3370 e-Mail rntekippe@cox.net	COMMITTEE CHAIR (mandatory except for a candidate's committee) Name ↓ ↓ SAME Mailing Address ↓ ↓ City, State ↓ ↓ Zip Code ↓ ↓ Phone () _____ e-Mail _____
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INDICATE PURPOSE OF COMMITTEE – Check One Box Advocate for/against candidate(s) Advocate for/against ballot issue(s)
 Comment or description:

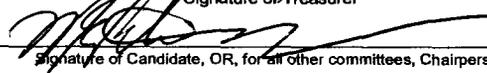
All Candidates Enter: **CB School Board** District: **Council Bluffs**
 Office Sought: _____ Year Standing for Election: **2003**
 Political Party (if applicable) _____ Date of Election: **Sept. 9, 2003**
 County/Local Candidates and Local Ballot/Franchise Committees Enter: _____
 County: **Pottawattamie**

Bank Account Name ↓ ↓ Committee To Re-Elect Mark Peterson 2003 Name of Financial Institution/type of Account ↓ ↓ Peoples National Bank / Checking Mailing Address ↓ ↓ 333 West Broadway City ↓ ↓ State ↓ ↓ Zip ↓ ↓ Council Bluffs, Iowa 51503	Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor ↓ ↓ Mark Peterson Mailing Address ↓ ↓ ↓ ↓ 301 Perrin Place City ↓ ↓ State ↓ ↓ Zip ↓ ↓ Council Bluffs, Iowa 51503 Phone (712) 323-1873 e-Mail mpeterson@changedoctor.com
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STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

1. 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.
2. That Iowa Code section 68A.6 and rule 351—4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due 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.
3. That Iowa Code section 68A.14 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.
4. That Iowa Code section 68A.15 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.
5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.40 through 68A.42 and rule 351—4.25.
6. 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


 Signature of Candidate, OR, for all other committees, Chairperson

 8/4/03
 Date Signed

 8/5/03
 Date Signed