

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

DEC 13 2004

Poweshiek

FORM DR-2 (Rev. 09/97)	DISCLOSURE REPORT
For Office Use Only	
Comm #	17588
Indexed	
Audited	
Computer	

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

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

SIGNATURE OF TREASURER (or person filing this report) [Signature] TELEPHONE 641-236-6558 DATE SIGNED 12-10-04

Penalties Due For Late Filed Reports Range from \$10 to \$400

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 10-15-04 thru 12-10-04 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
11-2-04

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

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.)	\$	<u>1059.23</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A)		<u>425.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>1484.23</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B)		<u>1484.23</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>0</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>0</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<u>YES</u> <input checked="" type="checkbox"/> <u>NO</u> <input type="checkbox"/>
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0</u>

SCHEDULE A (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)

Kennett 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
10/20/04	ID# CK#	Eric Lang 1842 400th Ave Brooklyn IA 52211		\$ 200.00	
10/22/04	ID# CK#	Poweshiek County Republican Central Committee PO Box 107 Grinnell		200.00	
10/25/04	ID# CK#	Sommy Schneckloth Malcom, IA 50157		25.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$

TOTAL (if last page of this schedule)

\$ 425.00

* 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 (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)
Kennett 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
10/15/04	ID# CK# 503	K GRN 909 1/2 Main Grinnell IA 50112	Advertising	\$ 53000
10/15/04	ID# CK# 504	mark kennett 796 400th Avenue Grinnell, IA 50112	Advertising	359.10
10/22/04	ID# CK# 505	Grinnell-Herald Register 813 5th AVE Grinnell, IA 50112	Advertising	70.54
12/10/04	ID# CK# 506	Mark Kennett 796 400th Avenue Grinnell, IA 50112	Candy, ink cartridges Advertising, paper	352.52
12/10/04	ID# CK# 507	Poweshiek Co. Republican Central Committee PO Box 107 Grinnell, IA 50112	Donation	172.07
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$1481.23

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)(f).)

FROM : ROLAND DIELEMAN, CPA's

PHONE NO. : 641 236 7237

Dec. 11 2004 09:16AM P5

\$\$\$ SCREEN PRINT \$\$\$

12/23/04 15:02 (00)

Kriegel, Karla

KarlaK DELL8 SCM210

C H E C K I N G A C C O U N T

T R A N S C R I P T S T A T E M E N T

Account: 236096

Kennett For Supervisor

Roger Roland Treasurer

P O Box 107

Grinnell

IA 50112

DEC 13 2004

Cycle/Book: T(3)/47/0

11/23/04 Thru 12/10/04

Balance	- - -	Credits	- - -	- - - -	Debits	- - -	Balance
Last Statement	Number	Amount	Number	Amount	Amount	This Statement	Balance
524.59	0	.00	2	524.59		.00	

Description	Debits	Credits	Date	Balance
BALANCE FORWARD			11/23/04	524.59
CHECK # 506	352.52		12/10/04	172.07
CHECK # 507	172.07		12/10/04	.00

FOR INSTRUCTIONS, SEE BACK OF FORM
This form is not applicable to statutory political committees.

Poweshick

Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

FORM	(Rev. 02/96)
DR-3 NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	<u>17588</u>
Indexed	_____
Audited	_____
Computer	_____
Certified Date of Dissolution	_____

DEC 13 2004 COMMITTEE NAME

Official Name of Committee	
<u>Kennett For Supervisor</u>	
Street	
<u>808 4th Ave P.O. Box 107</u>	
City, State, Zip Code	
<u>Grinnell IA 50112</u>	
Area Code	Telephone
<u>641</u>	<u>236-6558</u>

Effective date of dissolution:

December 10 10 2004

Roland Dieleman

Signature of Treasurer

12.10.04

Date Signed

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

R Kennett

Signature of Candidate - Required for Candidate's Committee

12/10/04

Date signed

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.