

# DISCLOSURE SUMMARY PAGE

*Ringgold*

FORM <b>DR-2</b> (Rev. 05/2002)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. # <u>17472</u>	
Indexed <u>SW</u>	
Audited _____	
Computer _____	

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

**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 Ethel Campbell Political Party Democrat  
Office Sought Ringgold Co. Bd. of Supervisors District (if Senate or House) \_\_\_\_\_

Ethel A. Campbell TELEPHONE 641-772-4768  
SIGNATURE OF TREASURER (or person filing this report)

JAN 7 2003

12/30/02  
DATE SIGNED

**Routine Penalties Due For Late Filed Reports Range from \$20 to \$800**

**SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**

I AM FILING A Jan 19, 2003 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  
Nov 5, 2002  
County & Local Committees, enter County in  
which Election is held  
Ringgold

## 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.) ..... \$ -0-

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 0-0

Schedule F: Loans Received total (Attach Schedule F) ..... -0-

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... -0-

**(Schedule H applies to Candidates' Committees Only)**

SUB-TOTAL ..... \$ -0-

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ... -0-

Schedule F: Loan Repayments total (Attach Schedule F) ..... -0-

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... \$ -0-

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ -0-0

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ \$65-70

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ -0-0

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?) \_\_\_\_\_ YES  NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) ..... \$ -0-0

**FILED**  
DEC 30 2002  
RINGGOLD COUNTY  
AUDITOR



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

# 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)
<b>DR-3</b> <b>NOTICE OF DISSOLUTION</b>	
<b>For Office Use Only</b>	
Comm. #	<u>17472</u>
Indexed	<u>SW</u>
Audited	_____
Computer	_____
Certified Date of Dissolution	_____

### COMMITTEE NAME

Official Name of Committee			
<u>Campbell for Supervisor Committee</u>			
<u>1060 U.S. Highway 1696</u>			
City, State, Zip Code			
<u>Shannon City IA 50861-8814</u>			
Area Code	Telephone	JAN	7 2003
<u>(641) 772-4768</u>			

Effective date of dissolution:

Dec 30, 19 2002

Ethel A. Campbell  
Signature of Treasurer

Dec 30, 2002  
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.

Ethel A. Campbell 12-30-02  
Signature of Candidate - Required for Candidate's Committee 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.

**FILED**  
DEC 30 2002  
HAROLD COUNTY  
CLERK

Kinggold

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 should be filled within 10 days of the committee's accepting contributions, making expenditures or incurring indebtedness exceeding \$750. Amendments should be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.

FORM <b>DR-1</b> (Rev. 05/02)	STATEMENT OF ORGANIZATION
<b>For Office Use Only</b>	
Comm. # _____	Indexed _____
Audited _____	Computer _____

JAN 7 2003  
FILED

COMMITTEE NAME (Required by law)

Campbell for Supervisor Committee

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 (list candidates under purpose of committee)

COMMITTEE TREASURER (Required by law) This address used for all reminders and correspondence)

COMMITTEE CHAIR (List additional officers on separate page)

Name: Ethel A. Campbell  
 Mailing Address: 1060 U.S. Highway 169  
 City, State Zip Code: Shannon City IA 50861-8814  
 Phone (641) 772-4768  
 e-Mail: \_\_\_\_\_

Name: Ethel A. Campbell  
 Mailing Address: 1060 U.S. Highway 169  
 City, State Zip Code: Shannon City IA 50861-8814  
 Phone (641) 772-4768  
 e-Mail: \_\_\_\_\_

INDICATE PURPOSE OF COMMITTEE - Check One Box  Advocate for/against candidate(s)  Advocate for/against ballot issue(s)

Comment or description: \_\_\_\_\_  
 All Candidates Enter:  
 Office Sought: Kinggold Co. Bd. of Supervisors District: \_\_\_\_\_  
 Political Party (if applicable) Democrat Year Standing for Election: 2002  
 County/Local Candidates and Local Ballot/Franchise Committees Enter:  
 County: Kinggold Date of Election: Nov 5, 2002

Bank Account Name: \_\_\_\_\_  
 Name of Financial Institution/type of Account: "All campaign expenses paid from personal funds"  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor:  
Ethel Campbell  
 Mailing Address: 1060 U.S. Highway 169  
 City: Shannon City IA State: IA Zip: 50861-8814  
 Phone (641) 772-4768  
 e-Mail: none

DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION (Statement of intent required by law for all committees, except state parties and central committees and committees using only personal funds.)

- (1) DONATED TO \_\_\_\_\_ COUNTY CENTRAL COMMITTEE
- (2) DONATED TO \_\_\_\_\_ LOCAL/STATE/NAT'L POLITICAL PARTY (underline one)
- (3) DONATED TO CHARITABLE ORGANIZATION (specify) \_\_\_\_\_
- (4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND (underline one)
- (5) PARTISAN CONGRESSIONAL DISTRICT FUND
- (6) PRORATED REFUND TO CONTRIBUTORS
- (7) TRANSFER TO ANOTHER COMMITTEE OF THIS SAME CANDIDATE (CANDIDATES ONLY)
- (8) RETURN TO PARENT ENTITY GENERAL FUND (PACs ONLY)
- (9) OTHER (PACs ONLY), PLEASE BE SPECIFIC

STATEMENT OF AFFIRMATION BY TREASURER AND CANDIDATE; OR POLITICAL COMMITTEES, BY CHAIRPERSON I am aware that I am required to file disclosure reports if the committee receives contributions, makes expenditures, or incurs indebtedness in excess of \$750.00 in a calendar year to expressly advocate for any candidate or ballot issue. I understand that although the treasurer normally prepares and files reports, the candidate or chairperson (PACs) is responsible under the law for accurate and timely disclosure reports and that late-filed reports are subject to civil penalties and possible other legal action. I understand that by filing this form, I am subject to the laws found in Iowa Code chapter 56, chapter 68B and administrative rules found in chapter 351. I affirm that all committee officers have been informed of their appointment and obligations.

Ethel A. Campbell  
Signature of Treasurer

Dec 30, 2002  
Date Signed

Ethel Campbell  
Signature of Candidate, OR, if PAC, Central Committee or Local Ballot Issue, Chairperson

Dec 30, 2002  
Date Signed

FILED  
DEC 30 2002  
KINGGOLD COUNTY AUDITOR