

Scott

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>17566</u>
Logged In	
Scanned	
Computer	
Audited	

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

Golinghorst for Supervisor

IMPORTANT: Indicate by # type of committee you are reporting for: 4
 (1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party
 (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other
 Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name Richard G. Golinghorst Political Party (if applicable) Republican
 Office Sought Board of Supervisor District (if Senate or House) FAX

Late reports are subject to possible civil and criminal penalties.

Richard G. Golinghorst 563-284-4194 7-15-04
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A July 19th 2004 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by # 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 DR-3 is filed.)

Local Committees, enter Date of Election <u>11-2-04</u>
County & Local Committees, enter County in which Election is held <u>Scott</u>

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds 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.) \$ 146.79

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 625.⁰⁰

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 \$ 771.79

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 229.50

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) \$ 542.29

**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) \$ _____

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)
 Golinghorst 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/YY)	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
06/03/04	ID# CK#	Bill and Marian Storzjohann 17645 100th Ave Davenport, IA 52804		\$25.00	<input type="checkbox"/>
06/02/04	ID# CK#	R. Hovey and Maggie Tinsman 2865 Hickory Hill Lane Bettendorf, IA 52722		50.00	<input type="checkbox"/>
06/10/04	ID# CK#	Jerry and Ann Mohr 23785 130th Ave Eldridge, IA 52748		50.00	<input type="checkbox"/>
06/09/04	ID# CK#	Ken and Ruth Wilcke P.O. Box 788 Walcott, IA 52773		50.00	<input type="checkbox"/>
06/19/04	ID# CK#	John Gumpert, Sr. 3224 W. Lombard Davenport, IA 52804		25.00	<input type="checkbox"/>
06/17/04	ID# CK#	Cal Werner 25370 E. Valley Dr. Bettendorf, IA 52722		75.00	<input type="checkbox"/>
06/19/04	ID# CK#	Bob and Marcia Golinghorst 8220 230th St Walcott, IA 52773	Brother	250.00	<input type="checkbox"/>
07/01/04	ID# CK#	Mickey McArthur P.O. Box 390 Sonoita, Arizona 85637		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$
\$ 625.00

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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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

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.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Golinghorst 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
05/18/04	ID# CK#	Bettendorf Office 2390 Cumberland Square Dr. Bettendorf, IA 52722	Business cards and labels	\$ 12.83
06/03/04	ID# CK#	Farm and Fleet 8535 Northwest Blvd Davenport, IA 52806	Paint for signs	6.41
06/04/04	ID# CK#	Walmart	C Clamps for float	8.43
06/11/04	ID# CK#	North Scott Press 214 N 2nd Eldridge, IA 52748	Advertising for Blue Grass Homecoming	25.00
06/11/04	ID# CK#	Pat McGuire's 3333 N Harrison St Davenport, IA 52806	<i>Meeting for Campaign Volunteers - meals</i>	70.51
06/16/04	ID# CK#	Farm and Fleet 8535 Northwest Blvd Davenport, IA 52806	Paint for signs	6.41
06/17/04	ID# CK#	Dick N Son's Lumber 205 E Harrison St Blue Grass, IA 52726	Paint for signs	15.89
07/03/04	ID# CK#	Subway 235 N Dad Lane Blue Grass, IA 52726	<i>Sandwiches for Bettendorf Parade - After Parade for Volunteers</i>	42.59
SUB-TOTAL				\$ 188.07
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

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.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Golinghorst 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
07/07/04	ID# CK#	Bettendorf Office Products 2390 Cumberland Square Dr Bettendorf, IA 52722	printing of informational cards about Candidate.	\$ 41.43
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 729.50

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.
TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1200.00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E - TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1200.00

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07/19/2004 MON 3:00 FAX 15632846031 WALCOTT TRUST SAVINGS BK 005/008