

Scott

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

<b>FORM DR-2</b> (Rev. 01/2003)	<b>DISCLOSURE REPORT</b>
For Office Use Only	
Comm. #	17378
Indexed	SW
Audited	
Computer	

COMMITTEE NAME (Must be same as on Statement of Organization)  
CITIZENS FOR CAMMIE POHL

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 State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name: CAMPELLIA POHL Political Party: DEMOCRAT  
 Office Sought: COUNTY SUPERVISOR District (if Senate or House):

JAN 21 2003

*Camellia Pohl*

SIGNATURE OF TREASURER (or person filing this report)

563-391-6792 TELEPHONE

1-21-02 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 JANUARY 19 REPORT FOR AN/A (1) ELECTION/(2) NON-ELECTION YEAR.  
(report date) Indicate one 2

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 SCOTT

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.)	1,447.30
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	2,018.00
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
<b>SUB-TOTAL</b> .... \$	3,465.30
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	960.61
Schedule F: Loan Repayments total (Attach Schedule F)	2,500.00
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	4.69

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 4,036.88
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 0.00

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

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<b>SCHEDULE</b> <b>A</b> (Rev. 06/97)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)  
 CITIZENS FOR CAMMIE POHL

**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
10/25/02	ID# CK#	BRIDGE STRUCTUAL & ORNAMENTAL WORKERS 8000 29TH STREET WEST ROCK ISLAND IL 61201		\$ 100.00	
10/25/02	ID# CK#	EFFECTIVE GOVERNMENT COMMITTEE 607 14TH STREET NW STE 800 WASHINGTON DC 20005		500.00	
10/25/02	ID# CK#	DOUGLAS WALTER 4651 NORFOLK PL BETTENDORF IA 52722		50.00	✓
10/25/02	ID# CK#	SUSAN PAMPERIN 2718 COLLEGE AVE DAVENPORT IA		50.00	✓
10/25/02	ID# CK#	UNITEMIZED CONTRIBUTIONS		93.00	✓
10/28/02	ID# CK#	JEAN BOYER 1000 BRADY ST DAVENPORT IA 52803		25.00	
11/01/02	ID# CK#	S.J. SMITH WELDING (DEPOSIT RETURN) 3707 W. RIVER DR DAVENPORT IA 52802		150.00	
12/09/02	ID# CK#	TEAMSTERS LOCAL 371 7909 42ND STREET WEST ROCK ISLAND IL 61201		50.00	
12/14/02	ID# CK#	LABORERS LOCAL 309 PAC 2835 7TH AVE ROCK ISLAND IL 61201		250.00	
12/30/02	ID# CK#	ELECTRICAL WORKERS LOCAL 145 1700 52ND AVE MOLINE IL 61265		750.00	
<b>SUB-TOTAL</b>				\$	
<b>TOTAL (if last page of this schedule)</b>				\$	2,018.00

\* 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.

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
CITIZENS FOR CAMMIE POHL

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
10/21/02	ID# CK# 1037	FARM & FLEET 8535 NORTHWEST BLVD DAVENPORT IA 52806	SIGN STAKES	\$ 12.36
10/22/02	ID# CK# 1038	MENARDS 110 W. 53RD DAVENPORT IA 52807	SIGN STAKE	2.02
10/25/02	ID# CK# 1039	HALFTIME 4201 N. BRADY STREET DAVENPORT IA 52807	FOOD & DRINKS FOR FUNDRAISER	267.99
10/26/02	ID# CK# 1040	LCS EXPRESSIONS 702 PERRY STREET DAVENPORT IA 52803	T-SHIRTS FOR PARADE	128.00
10/26/02	ID# CK# 1041	WALMART 3785 ELMORE AVE DAVENPORT IA 52807	DECORATIONS FOR FLOAT AND CANDY FOR PARADE	20.20
10/27/02	ID# CK# 1042	WALGRFENS 1720 W. KIMBERLY RD DAVENPORT IA 52806	CANDY & BUCKETS FOR PARADE	32.05
11/01/02	ID# CK# 1043	S.J. SMITH WELDING 3707 W. RIVER DR DAVENPORT IA 52802	HELIUM FOR BALLONS	25.96
11/02/02	ID# CK# 1044	MPM 1024 W. 3RD STREET DAVENPORT IA 52801	CAMPAIGN BUTTONS	128.49
SUB-TOTAL				\$ 617.07
<b>TOTAL (if last page of this schedule)</b>				\$

**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)(i).)

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE</b> <b>B</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)  
 CITIZENS FOR CAMMIE POHL

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
11/02/02	ID# CK# 1045	SCOTT COUNTY DEMOCRATS 232 W. 15TH STREET DAVENPORT IA 52803	RENT	\$ 100.00
11/02/02	ID# CK# 1046	HALFTIME 4201 N. BRADY STREET DAVENPORT IA 52807	FOOD FOR VOLUNTEERS/ PRESS RELEASE	68.26
11/08/02	ID# CK# 1047	TREASURER STATE OF IA DES MOINES IA	TAX FROM RAFFLE	15.28
11/27/02	ID# CK# 1049	CAMELLIA POHL 1216 N. CONCORD AVE DAVENPORT IA 52804	DEBT PAYMENT	100.00
12/09/02	ID# CK# 1050	CAMELLIA POHL 1216 N. CONCORD AVE DAVENPORT IA 52804	DEBT PAYMENT	60.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 343.54
TOTAL (if last page of this schedule)				\$ 960.01

**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)(i).)

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**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 CITIZENS FOR CAMMIE POHL

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

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
08/08/02	Camellia Pohl 1216 N. Concord Davenport IA 52804	self	supplies, shirts, computer ink & stickers	\$ 560.00	<input type="checkbox"/>
11/10/02	Camellia Pohl 1216 N. Concord Davenport IA	self	vehicle mileage 9658 miles x .36 per mile	3,476.88	<input 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"/>
<b>SUB-TOTAL</b>				<b>\$ 4,036.88</b>	
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 4,036.88</b>	

\*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.

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SCHEDULE <b>F</b> (Rev. 3/8/96)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
CITIZENS FOR CAMMIE POHL

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.  
TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 2,500.00

**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.)

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

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

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT REPAID
11/15/02	CAMELLIA POHL 1216 N. CONCORD AVE DAVENPORT IA 52804	SELF	\$ 1,500.00
12/14/02	CAMELLIA POHL 1216 N. CONCORD AVE DAVENPORT IA 52804	SELF	250.00
12/30/02	CAMELLIA POHL 1216 N. CONCORD AVE DAVENPORT IA 52804	SELF	750.00

TOTAL (PART I) \$ \_\_\_\_\_

TOTAL CASH REPAYMENTS (PART II) \$ 2,500.00  
From Schedule E - TOTAL LOANS FORGIVEN \$ 0.00  
TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0.00

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P. 07  
FAX NO. 15633911079  
MELFOSTER CO KIMBERLY  
JAN-21-03 TUE 03:17 PM