

**FOR INSTRUCTIONS, SEE BACK OF FORM**

CHECK ONE:

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

APR 24 2000  
FILED

<b>FORM DR-1</b> (Rev. 06/99)	STATEMENT OF ORGANIZATION
<b>For Office Use Only</b>	
Comm. # _____	Indexed _____
Audited <input checked="" type="checkbox"/>	Computer _____

*\*An initial Statement of Organization should be filed within 10 days of the committee's accepting contributions, making expenditures or incurring indebtedness exceeding \$500. Amendments should be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.*

**COMMITTEE NAME (Required by law)**  
Re-elect Fitzgerald for Sheriff

**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** (This address used for all reminders and correspondence) (Required by law)  
THOMAS A. WEBER

**COMMITTEE CHAIR** (List additional offices on separate page)  
LYNN PURCELL

**Name**  
THOMAS A. WEBER

**Mailing Address**  
430 LYNN AVE

**City, State Zip Code**  
AMES IA 50014

**Home Phone** (515) 292-9462

**Day Phone** (515) 294-6453

**Name**  
LYNN PURCELL

**Mailing Address**  
3242 ELLIS ST.

**City, State Zip Code**  
AMES IA 50014

**Home Phone** (515) 292-7308

**Day Phone** (515) 239-1730

**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: STORY COUNTY SHERIFF District: \_\_\_\_\_  
 Political Party (if applicable): DEMOCRATIC Year Standing for Election: 2000  
 County/Local Candidates and Local Ballot/Franchise Committees Enter:  
 County: STORY Date of Election: NOV 7, 2000

**Bank Account Name**  
Re-elect Fitzgerald for Sheriff

**Name of Financial Institution/Type of Account**  
FIRST NATIONAL BANK checking

**Mailing Address**  
5th & BURNETT

**City State Zip**  
AMES IA 50010

**Candidate Name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor**  
Paul H. Fitzgerald

**Mailing Address**  
907 Clayton RD

**City State Zip**  
Colo, Iowa 50056

**Home Phone** (515) 377-2522

**Day Phone** (515) 382-7456

**DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION**  
 Indicate disposition of funds by marking appropriate number in box:  (1)

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

**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 \$500.00 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.

Thomas A. Weber  
 Signature of Treasurer

Paul H. Fitzgerald  
 Signature of Candidate, OR, if PAC, Central Committee or Local Ballot Issue, Chairperson

4/18/00  
 Date Signed

04-18-00  
 Date Signed