

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 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.

FORM <b>DR-1</b> (Rev. 02/96)	STATEMENT OF <u>Story</u> ORGANIZATION
For Office Use Only	
Comm. # <u>17245</u>	
Indexed	
Audited	
Computer	

**COMMITTEE NAME (Required by law)**  
Committee to Elect Stephen Holmes

**IMPORTANT: indicate type of committee you are reporting for:**  **A**  
 (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)

<b>COMMITTEE TREASURER</b> (This address used for all reminders (Required by law) and correspondence)	<b>COMMITTEE CHAIR</b> (List additional officers on separate page)
Name <u>Deb Eide</u>	Name <u>Stephen H Holmes</u>
Mailing Address <u>27202 560<sup>th</sup> Ave.</u>	Mailing Address <u>737 7<sup>th</sup> St.</u>
City, State Zip Code <u>Ames IA 50010</u>	City, State Zip Code <u>Nevada, IA 50201</u>
Home Phone <u>(515) 232-2508</u>	Home Phone <u>(515) 382-3560</u>
Day Phone <u>(515) 232-5104</u>	Day Phone <u>(515) 382-7255</u>

**PACs: INDICATE PURPOSE OF COMMITTEE**

All Candidates Enter:  
 Office Sought: County Attorney District: Story County  
 Political Party (if applicable) Democrat Year Standing for Election: 1998  
 County/Local Candidates and Local Ballot/Franchise Committees Enter:  
 County: Story Date of Election: Nov. 3 1998

<b>Bank Account Name</b> <u>Committee to elect Stephen Holmes</u>	<b>Candidate Name &amp; Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor</b> <u>Stephen Holmes</u>
<b>Name of Financial Institution/Type of Account</b> <u>State Bank &amp; Trust Co. / Checking</u>	<b>Mailing Address</b> <u>737 7<sup>th</sup> St.</u>
<b>Mailing Address</b> <u>P.O. Box 327</u>	<b>City State Zip</b> <u>Nevada IA 50201</u>
<b>City State Zip</b> <u>Nevada IA 50201</u>	<b>Home Phone</b> <u>(515) 382-3560</u>
	<b>Day Phone</b> <u>(515) 382-7255</u>

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

Indicate disposition of funds by marking appropriate number in box:  **2**

(1) DONATED TO _____ COUNTY CENTRAL COMMITTEE	(8) PRORATED REFUND TO CONTRIBUTORS
(2) DONATED TO _____ LOCAL/STATE/NATL 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 five hundred dollars in a calendar year for the purpose of supporting or opposing any candidate for public office or ballot issue. I am also aware that late-filed reports are subject to civil penalties (fines) under the disclosure law. I also 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. Finally, I affirm that all committee officers have been informed of their appointment and obligations.

Debbie Eide Signature of Treasurer  
Stephen H Holmes Signature of Candidate or Chairperson (if a PAC)

4-29-98 Date Signed  
5-2-98 Date Signed