

DISCLOSURE SUMMARY PAGE

Reset Form

Story

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>17726</u>
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

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

Hutter for Auditor

IMPORTANT: Indicate by # type of committee you are reporting for: 5
 (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 Jim Hutter Political Party (if applicable) Democratic
 Office Sought Story County Auditor District (if Senate or House) _____

Late reports are subject to possible civil and criminal penalties.

Robert E. McCarley (515) 956-3393 10/18/04
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A October 19, 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>November 2, 2004</u>
County & Local Committees, enter County in which Election is held <u>Story</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.)\$ 1414.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1668.00

Schedule F: Loans Received total (Attach Schedule F) 3000.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H) _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL\$ 6082.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 3899.91

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)\$ 2182.09

****UNPAID BILLS** (From Schedule D - Attach Schedule D).....\$ 910.99

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)\$ 244.34

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)\$ 3000.00

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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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)
Hutter for Auditor

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 FUNDS RAISE INCOME
07/14/04	ID# CK#	Harry and Mary Jo Brearley 1537 Linden Dr. Ames, IA 50010		\$ 100.00	<input type="checkbox"/>
08/24/04	ID# CK#	George and Dorothy Kizer 3919 Dawes Dr. Ames, IA 50010		25.00	<input type="checkbox"/>
09/27/04	ID# CK#	Story County Democratic Central Committee P.O. Box 1256 Ames, IA 50014 Charles Sage, Treasurer		1400.00	<input type="checkbox"/>
09/30/04	ID# CK#	Mrs. Fred R. McLain 23817-- 667th Ave. Nevada, IA 50201		25.00	<input type="checkbox"/>
10/14/04	ID# CK#	Robert E. McCarley 3102 Diamond ST. Ames, IA 50010		50.00	<input type="checkbox"/>
7/16-10/15/04	ID# CK#	Unitemized Contributions		68.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1668.00	
TOTAL (if last page of this schedule)				\$ 1668.00	

* 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). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	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)
Hutter for Auditor

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
08/26/04	ID# CK#	Jim Hutter 832 Crystal St. Ames, IA 50010	Parade Candy purchase at Sam's Club	\$ 46.68
9/27/04	ID# CK#	Postmaster U. S. Post Office Ames, IA 50010	Postage for campaign mailings	1170.33
9/29/04	ID# CK#	Postmaster U. S. Post Office Ames, IA 50010	Postage for campaign mailings	128.44
9/29/04	ID# CK#	The Tribune 317 5th St. Ames, IA 50010	Advertising	473.63
10/04/04	ID# CK#	Nite Owl Printing 118Hayward Ave. Ames, IA 50014	Campaign flyers	1500.00
10/08/04	ID# CK#	Nite Owl Printing 118 Hayward Ave. Ames, IA 50014	Invitations for fund raiser	152.00
10/12/04	ID# CK#	Postmaster U. S. Post Office Ames, IA 50010	Postage	360.16
10/13/04	ID# CK#	Story Couty Auditor 900 6th St. Nevada, IA 50201	Computer disk of registered voters	68.67
SUB-TOTAL				\$ 3899.91
TOTAL (if last page of this schedule)				\$ 3899.91

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).)

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

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NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

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SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
09/09/04	Jim Hutter 832 Crystal St. Ames, IA 50010	Design of Campaign Brochure (Sigler Printing Co.)	\$ 160.50
09/23/04	As above	Mailing Labels (Staples)	48.14
09/24/04	As above	Mailing Labels (Sam's Club)	37.28
10/01/04	As above	Mailing Labels (Sam's Club)	37.28
10/08/04	As above	Mailing Labels (Sam's Club)	37.28
10/08/04	As above	Envelopes (Dollar General)	18.19
10/11/04	As above	Yard Signs (Victory Store.com)	572.32
SUB-TOTAL			\$ 910.99
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 910.99

*If actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or

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SCHEDULE E (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
06/15/04	Jim Hutter 832 Crystal St. Ames, IA 50010	Same	T-Shirt Transfers	\$ 21.39	<input type="checkbox"/>
07/09/04	As above	Same	Campaign buttons	4.24	<input type="checkbox"/>
07/17/04	As above	Same	Table displays	21.79	<input type="checkbox"/>
07/19/04	As above	Same	Campaign t-shirts	139.74	<input type="checkbox"/>
07/29/04	As above	Same	Parade candy	39.75	<input type="checkbox"/>
07/30/04	As above	Same	Candy buckets	6.38	<input type="checkbox"/>
07/31/04	As above	Same	Water for parade workers	5.55	<input type="checkbox"/>
09/25/04	As above	Same	Parking fee	2.50	<input type="checkbox"/>
10/09/04	As above	Same	Parking fee	3.00	<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 244.34	
TOTAL (if last page of this schedule)				\$ 244.34	

*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 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)
Hutter for Auditor

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.
TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0

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
10/02/04	Jim Hutter 832 Crystal St. Ames, IA 50010	Same	\$ 3000.00

TOTAL (PART I) \$ 3000.00

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 \$ 3000.00

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