

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...

FORM DR-1 STATEMENT OF ORGANIZATION
For Office Use Only
Comm # 17651
Indexed
Audited
Computer

COMMITTEE NAME (Required by law) Mosiman for Auditor
MAY 2 2000

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

COMMITTEE TREASURER (Required by law) (This address used for all reminders and correspondence)
COMMITTEE CHAIR (List additional officers on separate page)

Name: Debbie Schmitt
Mailing Address: 1110 Northwestern Ave.
City, State Zip Code: Ames, IA 50010
Home Phone: (515) 232-9084
Day Phone: same

Name: Jeff Mosiman
Mailing Address: 297 Dave Circle
City, State Zip Code: Ames, IA 50010
Home Phone: (515) 233-6680
Day Phone: (515) 232-7103

INDICATE PURPOSE OF COMMITTEE - Check One Box
Advocate for/against candidate(s)
Advocate for/against ballot issue(s)
Comment or description: Committee to elect Mary Mosiman

All Candidates Enter:
Office Sought: Story County Auditor
Political Party (if applicable): Republican
County/Local Candidates and Local Ballot/Franchise Committees Enter:
County: Story
District:
Year Standing for Election: 2000
Date of Election: November 7

Bank Account Name
Name of Financial Institution/Type of Account
Mailing Address
City State Zip

Candidate Name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor
Mary Mosiman
Mailing Address: 704 Top-0-Hollow Rd.
City: Ames State: IA Zip: 50010
Home Phone: (515) 233-5887
Day Phone: same

DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION
Indicate disposition of funds by marking appropriate number in box: 4

- 1) DONATED TO COUNTY CENTRAL COMMITTEE
2) DONATED TO LOCAL/STATE/NATL POLITICAL PARTY
3) DONATED TO CHARITABLE ORGANIZATION
4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND
5) PARTISAN CONGRESSIONAL DISTRICT FUND
6) PRORATED REFUND TO CONTRIBUTORS
7) TRANSFER TO ANOTHER COMMITTEE OF THIS SAME CANDIDATE (CANDIDATES ONLY)
8) RETURN TO PARENT ENTITY GENERAL FUND (PACs ONLY)
9) OTHER (PACs ONLY), PLEASE BE SPECIFIC

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...

Signatures: Debbie Schmitt (Treasurer), Mary Mosiman (Candidate)
Date Signed: 4-27-00

FILED
MAY - 1 AM 9:21
STORY COUNTY AUDITOR