FOR INSTRUCTIONS, SEE BACK OF FORM

FORM **DR-2** (Rev. 01/98) DISCLOSURE REPORT

DISCLOSURE SUMMARY PAGE

NOV 26 2003

For Office Use Only
Comm. # _____
Indexed _____
Audited _____
Computer _____

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Story County Republican Central Committee

IMPORTANT: Indicate type of committee you are reporting for: 7

(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

Anthony S Clem — SIGNATURE OF TREASURER (or person filing this report)
(515)-233-3073 — TELEPHONE
11-25-03 — DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from $20 to $800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A October 20, 2003 (report date) REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.
Indicate one 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 Notice of Dissolution is filed.)

Local Committees, enter Date of Election _____
County & Local Committees, enter County in which Election is held: Story

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.) ..... $ 7593.21

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 1984.83
Schedule F: Loans Received total (Attach Schedule F) ..... _____
Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL..... $ 9578.04

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 5808.06
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) ..... $ 3769.98

UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $ _____
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $ _____
OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $ _____

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

SCHEDULE A (Rev. 06/97) — MONETARY RECEIPTS

☐ 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)*
Story County Republican Central Committee

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
2-3-03	ID# CK#	Stu Iverson - Reimbursement for Postage/Mailing.		$ 1000.00	
6-9-03	ID# CK#	Spring Fling Donations/Fees		730.00	
6-18-03	ID# CK#	Qwest - Telephone Installation Omaha, NE 68103 Refund/Deposits		254.83	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 1984.83

TOTAL *(If last page of this schedule)* $ 1984.83

* 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.

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING FORM	

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

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)*
Story County Rupublican Central Committee

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
1-11-03	ID# CK# 876	Iowa Ethics Board Des Moines, IA 50309	Civil penalty	$ 50.00
2-12-03	ID# CK# 877	Anthony Clem Ames, IA 50010	P.O. Box Rental Reimbursement	126.00
2-18-03	ID# CK# 878	US Postmaster Ames, IA 50010	Postage expense	34.00
4-11-03	ID# CK# 879	Story County Auditor Nevada, IA 50201	Election lists/label expenses	47.28
4-11-03	ID# CK# 880	City of Ames 515 Clark Ames, IA 50010	Headquarter Utilities	214.54
4-14-03	ID# CK# 881	Helping Hands Carol Stream, IL 60132	Temp help – Phone Banks	1,600.50
4-14-03	ID# CK# 882	Sigler Printer Ames, IA 50010	Printing Expenses	2536.25
5-27-03	ID# CK# 883	Andrew Smalley 1209 Harding Ames, IA 50010	Reimbursement for Spring fling (fundraiser)	46.00
			SUB-TOTAL	$4654.57
			TOTAL *(If last page of this schedule)*	$

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)*
Story County Republican Central Committee

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
7-10-03	ID# CK# 884	Dan Gonnerman Ames, IA 50010	Reimbursement for Spring Fling (fundraiser) - Food	$ 50.00
6-6-03	ID# CK# 885	First National Bank Ames, IA 50010	Cash for fundraising event	100.00
6-17-03	ID# CK# 886	Quest Omaha, NE 68103	phone service	163.83
6-17-03	ID# CK# 887	City of Ames Ames, IA 50010	Rent	34.00
	ID# CK# 888	VOID		VOID
6-23-03	ID# CK# 889	Quest Omaha, NE 68103	phone service	64.63
7-8-03	ID# CK# 890	The Van Wall Group Ames, IA 50010	music for fundraiser	26.50
9-5-03	ID# CK# 891	The Tribune Ames, IA 50010	Advertising Expense	523.03
			SUB-TOTAL	$ 5616.56
			TOTAL ***(If last page of this schedule)***	$

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

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
10-8-03	ID# e-transfer CK#	Qwest Omaha, NE 68103	phone service	$ 191.50
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$ 5808.06
			TOTAL *(If last page of this schedule)*	$ 5808.06

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