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FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

MAY 17 2004

FORM DR-2 (Rev. 01/98) DISCLOSURE REPORT For Office Use Only Comm. # 9174 Indexed SW tracked Audited Computer

COMMITTEE NAME (Must be same as on Statement of Organization) Tama County Democratic Central Committee IMPORTANT: Indicate type of committee you are reporting for: 7

Signature of Treasurer: Donna J. Smith Telephone: 641-484-5917

DATE SIGNED: May 14, 2004

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 May 19, 2004 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 Nov. 2, 2004 County & Local Committees, enter County in which Election is held TAMA

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$545.79), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 0, Schedule F: 0, Schedule H: 0), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: 94.90, Schedule F: 0), CASH ON HAND at the end of this reporting period (\$450.89).

Table with columns for description and amount. Rows include: UNPAID BILLS, IN KIND CONTRIBUTIONS, OUTSTANDING LOANS, CANDIDATE COMMITTEES ONLY, CONSULTANT BREAKDOWN, VALUE OF CAMPAIGN PROPERTY.

FOR INSTRUCTIONS, SEE BACK OF 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.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
 Tama County Democratic 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
1/21/04	ID# CK# 411	Tama Toledo Area Chamber of Commerce PO Box 367 Toledo IA 52342	Chamber dues	\$ 10. ⁰⁰
2/12/04	ID# CK# 412	City of Tama 305 Siegel Tama IA 52339	Civic Center room rental	50. ⁰⁰
2/20/04	ID# CK# 413	Anne Rebik 1304 Siegel Tama IA 52339	reimbursement convention food/materials/cost	34. ⁹⁰
	ID# CK#			
SUB-TOTAL				\$ 94. ⁹⁰
TOTAL (if last page of this schedule)				\$ 94.⁹⁰

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).)