

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	9174
Logged In	SW
Scanned	
Computer	1
Audited	

COMMITTEE NAME (Must be same as on Statement of Organization)
Tama County Democratic Central Committee

IMPORTANT: Indicate by # type of committee you are reporting for: 4
 (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 _____ Political Party (if applicable) _____
 Office Sought _____ District (if Senate or House) _____

Late reports are subject to possible civil and criminal penalties.

John Salsburg 319 476-7393 10-17-04
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A October 19, 2004 **FINANCIALS & CAMPAIGN DISCLOSURE 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 **FILED** Form of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
~~11-2-04~~ 11-2-04
 County & Local Committees, enter County in which Election is held
Tama

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.)\$ 425.89

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 2109.00

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\$ 2534.89

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 1048.56

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)\$ 1486.33

****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) \$ _____

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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)
Tama County Democratic 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
8-16	ID# CK#	Chet Culver		\$ 25.00	<input checked="" type="checkbox"/>
8-16	ID# CK#	Proceeds from Garden Party Fund-raiser		1524.00	<input checked="" type="checkbox"/>
8-24	ID# CK#	James McCurrell		25.00	<input type="checkbox"/>
9-11-04	ID# CK#	Duane Lempke P.O. Box 446 Tama, IA 52339		50.00	<input type="checkbox"/>
9-11-04	ID# CK#	Mark Halverson		50.00	<input type="checkbox"/>
9-16-04	ID# CK#	John Fowler 404 Tiltford Oysart, IA 52224		20.00	<input type="checkbox"/>
9-16-04	ID# CK#	Alan Kline 2923 14 Ave Toledo, IA 52342		25.00	<input type="checkbox"/>
9-16-04	ID# CK#	Jack Burk 408 S. Broadway Toledo, IA 52342		25.00	<input type="checkbox"/>
9-16-04	ID# CK#	Cash donations at office		25.00	<input type="checkbox"/>
9-17-04	ID# CK#	Eleanor Murdoch		25.00	<input type="checkbox"/>

SUB-TOTAL

\$ 1794
\$

TOTAL (if last page of this schedule)

* 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



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)
Tama County Democratic Central Committee

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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
10-13-04	ID# CK#	Colleen Burke 206 E Ross Toledo, IA 52342		\$ 20.00	<input type="checkbox"/>
10-13-04	ID# CK#	Jim + Pam TeKippe 1504 McClellan Tama, IA 52339		25.00	<input type="checkbox"/>
10-13-04	ID# CK#	Anne Michael 1304 Siegel Tama, IA		30.00	<input type="checkbox"/>
10-13-04	ID# CK#	Robert Jacobsen 306 W. 6 th Tama, IA 52339		25.00	<input type="checkbox"/>
10-13-04	ID# CK#	Cash donation at office		90.00	<input type="checkbox"/>
10-15-04	ID# CK#	Cash donation at Office		25.00	<input type="checkbox"/>
10-15-04	ID# CK#	Donna Smith 1508 Siegel Tama, IA 52339		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 315

TOTAL (if last page of this schedule)

\$ 2109

* 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.

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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)
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
8-30-04	ID# CK# 1001	Eagles 2828	Hall rental	\$185.00
9-13-04	ID# CK# 1002	Dori Rammelsberg - Dvorak 2437 240th St Clutier IA 52217	reimbursement for Shopper ad	46.40
9-13-04	ID# CK# 1003	Allan Richards	Office Rent	300.00
8-25-04	ID# CK#	Harland Checks	Check Charge	11.45
9-26-04	ID# CK# 1004	Tama County Publishing	Shopper ad	52.88
10-12-04	ID# CK# 1005	Iowa Telecom	Telephone bill	353.32
10-12-04	ID# CK# 1006	Jim Murphy 801 State Tama IA	reimbursement for Cable TV bill	75.35
9-31-04	ID# CK#	Lincoln Savings Bank	Maintenance Fee	9.16
SUB-TOTAL				\$1033.56
TOTAL (If last page of this schedule)				1033.56

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).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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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
10-13	ID# CK# 1007	Tama County Auditor	Absentee ballots reports	\$ 15.00
	ID# CK#			
SUB-TOTAL				\$ 15.00
TOTAL (if last page of this schedule)				\$ 1048.56

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).)