IA ETHICS AND CAMPAIGN DISCLOSURE

2008 JUL 18 AM 9:50

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 must be filed within 10 days of the committee's accepting contributions, making expenditures, or incurring indebtedness exceeding $750. Amendments must be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization. A candidate with an open committee that exceeds $750 in activity for another office shall file within 10 days either a new or amended DR-1 disclosing information concerning the campaign for the new office sought.*

FORM DR-1 (Rev. 04/2008)	STATEMENT OF ORGANIZATION

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

COMMITTEE NAME ↓ ↓ (A candidate's committee must include the candidate's last name in the name of the committee.)
Friends of Extension and 4H

IMPORTANT: Indicate type of committee you are reporting for: 11
(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)Statewide 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 (including committee involved in multiple city/county ballot issues)

COMMITTEE TREASURER (mandatory for all committees)
Name ↓ ↓ Joyce Cortum
Mailing Address ↓ ↓ 6784 Dubuque Trail
City, State ↓ ↓ Zip Code ↓ ↓ Norwalk, IA 50211
Phone (515) 981-9850
e-Mail joycecortum@msn.com

COMMITTEE CHAIR (mandatory except for a candidate's committee)
Name ↓ ↓ Marvin D. Perry
Mailing Address ↓ ↓ 5649 Lisbon St.
City, State ↓ ↓ Zip Code ↓ ↓ Prole, IA 50229
Phone (515) 961-7994
e-Mail perryproof@netzero.net

INDICATE PURPOSE OF COMMITTEE – Check One Box ☐ Advocate for/against candidate(s) ☑ Advocate for ballot issue(s) ☐ Advocate against ballot issue(s)
Comment or description:

All Candidates Enter:
Office Sought: ____
Political Party (if applicable) ____
District: ____
Year Standing for Election: ____

County/Local Candidates and Local Ballot Committees Enter:
County: ____
(If active in multiple ballot issue elections, attach list of counties
Date of Election: ____

Bank Account Name (must match committee name) ↓ ↓
Friends of Extension and 4H
Name of Financial Institution/type of Account ↓ ↓
Peoples Bank
Mailing Address ↓ ↓
400 E. Iowa
City ↓ ↓ State ↓ ↓ Zip ↓ ↓
Indianola, IA 50125

Candidate name & Address or **Parent Entity** (PACs, if applicable), **Affiliate, or Sponsor** ↓ ↓
Mailing Address ↓ ↓
City ↓ ↓ State ↓ ↓ Zip ↓ ↓
Phone ( ) ____
e-Mail ____

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

1. The committee and all persons connected with the committee understand that they are subject to the laws in Iowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the Iowa Administrative Code.

2. That Iowa Code section 68A.402 and rule 351—4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.

3. That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule. A committee that wishes to register a committee name for purposes of using the shorter "paid for by" and does not intend to cross the $750 filing threshold shall file the Form DR-SFA form in lieu of filing this form.

4. That Iowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.

5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.301 through 68A.303 and rule 351—4.25.

6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed.

Joyce Cortum — Signature of Treasurer — 7-13-08 Date Signed

Signature of Candidate, OR, for all other committees, Chairperson — 7-16-08 Date Signed

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Reset Form

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For Office Use Only
Comm. #
Indexed
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COMMITTEE NAME ↓↓ (A candidate's committee must include the candidate's last name in the name of the committee.)

Friends of Extension 4-H

IMPORTANT: Indicate type of committee you are reporting for: [11]

(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)Statewide 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 (including committee involved in multiple city/county ballot issues)

COMMITTEE TREASURER (mandatory for all committees)

Name ↓↓ Amy Tlach

Mailing Address ↓↓ 5856 Hwy 92

City, State ↓↓ Prole IA Zip Code ↓↓ 50229

Phone 515 962-0979

e-Mail amy@edje.com

COMMITTEE CHAIR (mandatory except for a candidate's committee)

Name ↓↓ Marvin Perry

Mailing Address ↓↓ 5649 Lisbon St

City, State ↓↓ Prole Zip Code ↓↓ IA 50229

Phone (515) 961-7994

e-Mail perryproof@netzero.net

INDICATE PURPOSE OF COMMITTEE – Check One Box ☐ Advocate for/against candidate(s) ☐ Advocate for ballot issue(s) ☐ Advocate against ballot issue(s)

Comment or description:

All Candidates Enter:

Office Sought:

Political Party (if applicable)

District:

Year Standing for Election:

County/Local Candidates and Local Ballot Committees Enter:

County: Warren

(If active in multiple ballot issue elections, attach list of counties

Date of Election: 11/4/08

Bank Account Name (must match committee name) ↓↓

Friends of Extension 4-H

Name of Financial Institution/type of Account ↓↓

Peoples Bank

Mailing Address ↓↓

400 East Iowa

City ↓↓ Indianola State ↓↓ IA Zip ↓↓ 50125

Candidate name & Address or **Parent Entity** (PACs, if applicable), **Affiliate, or Sponsor** ↓↓

Mailing Address ↓↓

City ↓↓ State ↓↓ Zip ↓↓

Phone ( )

e-Mail

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Amy R Tlach — Signature of Treasurer — 7/16/08 Date Signed

Marvin Perry — Signature of Candidate, OR, for all other committees, Chairperson — 7-16-08 Date Signed