

Webster

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm #	<u>13461</u>
Logged In	<u>SM</u>
Scanned	_____
Computer	<u>SM</u>
Audited	_____

COMMITTEE NAME (Must be same as on Statement of Organization)
INMAN for Council 1

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): _____
 FEB 3 2005

Office Sought: FILED District (if Senate or House): _____

Late reports are subject to possible civil and criminal penalties.

Louise Hedrick (515) 576-0099 x 2266 2-3-05
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 2-3-05 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 Notice of Dissolution Form DR-3 (You must continue to file reports until a DR-3 is filed)

Local Committees, enter Date of Election <u>2-8-05</u>
County & Local Committees, enter County in which Election is held <u>Webster</u>

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.)	\$	<u>679.40</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1515</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>-</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>-</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
	SUB-TOTAL	\$ <u>2194.40</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>2186.89</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>-</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>7.51</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>-</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>97-</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>-</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>-</u>

For Instructions, See Back of Form

Reset 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)
INMANFOR Council

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/YY)	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
1/20/05	ID# CK#	Richard INMAN 1128 Summit Ave Fort Dodge IA		\$ 150-	<input type="checkbox"/>
1/20/05	ID# CK#	Judge Brown Jr 506 - 4th Ave S Fort Dodge Io		50	<input type="checkbox"/>
1/20/05	ID# CK#	"unitemized"		25	<input type="checkbox"/>
1/26/05	ID# CK#	"unitemized"		75	<input type="checkbox"/>
1/27/05	ID# CK#	Cecilia Penzler 2905 Solder Creek Dr. Fort Dodge IA		100	<input type="checkbox"/>
1/27/05	ID# CK#	John Perkins 1019 N 13th Fort Dodge IA		100	<input type="checkbox"/>
1/27/05	ID# CK#	Jeff Foreman 1178 Fountain Circle Fort Dodge IA		50	<input type="checkbox"/>
1/27/05	ID# CK#	"unitemized"		70	<input type="checkbox"/>
1/28/05	ID# CK#	Gib Stawek 448 Loomis Ave Fort Dodge IA		25	<input type="checkbox"/>
1/28/05	ID# CK#	Ed O'Leary 1604 N 13th Fort Dodge IA		75	<input type="checkbox"/>
SUB-TOTAL				\$ 720	
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

Reset 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)
INMAN for Council

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
1/28/05	ID# CK#	James Moench 704 Crest Ave Fort Dodge, IA		\$ 50	<input type="checkbox"/>
4/28/05	ID# CK#	Dan Kehl PO Box 1800 Fort Dodge, IA		100	<input type="checkbox"/>
1/31/05	ID# CK#	Richard INMAN 1128 Summit Ave Fort Dodge, IA		400	<input type="checkbox"/>
1/31/05	ID# CK#	"unintegrated"		20	<input type="checkbox"/>
2/1/05	ID# CK#	Derek Barry 301 S 8th apt 11 Fort Dodge, IA		50	<input type="checkbox"/>
2/1/05	ID# CK#	Delores Gurst 1402 12th Ave N Fort Dodge, IA		50	<input type="checkbox"/>
2/2/05	ID# CK#	"unintegrated"		25	<input type="checkbox"/>
2/2/05	ID# CK#	Richard INMAN 1128 Summit Ave Fort Dodge, IA		100-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL \$ 795
TOTAL (If last page of this schedule) \$ 1515

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Reset Form

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)
INMAN FOR COUNCIL

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
1/20/05	ID# CK#	Double M Sign 18 S 3rd Fort Dodge IA	yard signs	\$ 135
1/20/05	ID# CK#	Double M sign 18 S 3rd FD	2nd half large signs	250 -
1/28/05	ID# CK#	ICCC Collegian 330 ave A Fort Dodge	college Newspaper ad	25
2/2/05	ID# CK#	Chow Printing 1012 25th Ave N Fort Dodge	postcards	99.64
2/2/05	ID# CK#	Postmaster Fort Dodge	postage for mailing	436.70
2/2/05	ID# CK#	The Messenger 713 Center Ave Fort Dodge	Newspaper Campaign ad	1240.55
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 2186.89

TOTAL (if last page of this schedule) \$ 2186.89

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 detailed 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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE E (Rev. 08/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
INMAN for Council

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
1/20/05	Larry McLuckie 330 1 st AVE N Fort Oddy IA		name tags + Badges	\$ 52-	<input type="checkbox"/>
1/20/05	Richard INMAN 1128 Summit Ave Fort Oddy IA		sign posts	45-	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ **97**
TOTAL (if last page of this schedule) \$ **97**

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.