

FOR INSTRUCTIONS, SEE BACK OF FORM

Woodbury

5

Reset Form

DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 07/2003)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. # _____	Logged In _____
Scanned <u>10-1-03</u>	Computer _____
Audited _____	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
COMMITTEE TO ELECT JAHDE TO COUNCIL

**IMPORTANT:** Indicate type of committee you are reporting for:  4

( 1 )Statewide/Legislative Candidate ( 2 )Statewide PAC ( 3 )State Party ( 4 )County PAC  
( 5 )County PAC ( 6 )Ballot Issue/Franchise Committee ( 7 )County/City Central Committee  
( 8 )Support Slate of Candidates

**CANDIDATE COMMITTEES ONLY:**

Candidate Name LOREN "SKIP" JAHDE Political Party OCT 1 2003

Office Sought CITY COUNCIL District 1 (State or House)

ETHICS & CAMPAIGN DISCLOSURE BOARD

SIGNATURE OF TREASURER (or person filing this report) [Signature]

TELEPHONE 712 274-2122

DATE SIGNED 8/9/03

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 9/29/2000 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.  
(report date)

Indicate one

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  
10/7/2003

County & Local Committees, enter County in which Election is held  
WOODBURY

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.) ..... \$ 0

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 703<sup>00</sup>

Schedule F: Loans Received total (Attach Schedule F) ..... 495<sup>22</sup>

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... \_\_\_\_\_

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** ..... \$ 1198<sup>22</sup>

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... 495<sup>22</sup>

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) ..... \$ 703<sup>00</sup>

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)..... \$ \_\_\_\_\_

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 200.00

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)..... \$ 495<sup>22</sup>

**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

Reset Form

SCHEDULE <b>A</b> (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)  
*COMMITTEE TO ELECT JANDE TO 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
9/20/03	ID# CK# 10283	JIM SARFF 606 CUNNINGHAM DRIVE SIOUX CITY IA 51106		\$ 100 <sup>00</sup>	<input type="checkbox"/>
9/21/2003	ID# CK# 2080	GUS SKOUGARD 4421 BRINKROAD RD DES MOINES IA 50310		200 <sup>00</sup>	<input type="checkbox"/>
9/21/2003	ID# CK# 12195	KEVIN FOSS 4801 BRADFORD LAKE SIOUX CITY IA 51106	BROTHER-IN-LAW	100 <sup>00</sup>	<input type="checkbox"/>
9/22/2003	ID# CASH CK#	STEVE SADASTA 2801 S. CORNELIA ST SIOUX CITY IA 51106		100 <sup>00</sup>	<input type="checkbox"/>
9/22/2003	ID# CASH CK#	BOB ROE JR 2370 TRANSIT AVE SIOUX CITY IA 51106		50 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	MISC CASH all under 25 <sup>00</sup>		153 <sup>00</sup>	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 703 <sup>00</sup>	
TOTAL (if last page of this schedule)				\$ 703 <sup>00</sup>	

\* 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

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
*COMMITTEE TO ELECT JAMIE TO 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
9/20/2003	ID# <i>CM5H</i> CK#	<i>RECORD PRINTING</i> <i>1117 VILLA AVE</i> <i>SIOUX CITY IA 51103</i>	<i>PRINTING OF</i> <i>Signs</i>	\$ <i>495.22</i>
	ID# CK#			

SUB-TOTAL \$ *495.22*  
TOTAL (if last page of this schedule) \$ *495.22*

**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.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)  
*COMMITTEE TO ELECT JAHDE TO CO.*

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ \_\_\_\_\_

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**  
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
<i>7/20/2005</i>	<i>COLETTE JAHDE 2013 S. Magnolia SIOUX CITY IOWA</i>	<i>WIFE</i>	<i>\$ 495<sup>22</sup></i>

TOTAL (PART I) \$ *495<sup>22</sup>*

\*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 when it applies.

Reset Form

SCHEDULE <b>F</b> (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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ount.

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
*(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)*

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II) \$ \_\_\_\_\_

From Schedule E -- TOTAL LOANS FORGIVEN \$ \_\_\_\_\_

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 49522

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

COMMITTEE TO ELECT JAHOB TO 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
9/20	JIM STABER 2860 S. STIMREYS SIoux CITY, IA 51106		MEAT	\$ 200 <sup>00</sup>	<input checked="" 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"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 200 <sup>00</sup>	
TOTAL (if last page of this schedule)				\$ 200 <sup>00</sup>	

\*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.