Woodbury

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT

For Office Use Only
Comm. # 17436
Logged In
Scanned
Computer
Audited

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

Batcheller For Supervisor

IMPORTANT: Indicate by # type of committee you are reporting for: 5
(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: G. R. Batcheller
Political Party (if applicable): Republican
Office Sought: Woodbury County Supervisor
District (If Senate or House):

Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF PERSON FILING REPORT — **TELEPHONE** 605-232-5564 — **DATE SIGNED** 7-14-04

I AM FILING A July 19, 2004 (report date) REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. Indicate by # ✔

JUL 1 9 2004

☐ 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: November 2, 2004

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. (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.) ..... $ 2104.82

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1475.00

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 ..... $ 3579.82

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 1897.93

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) ..... $ 1681.89

****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) ..... $ 7200.00

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

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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)*

BATCHELLER FOR SUPERVISOR

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
5-19-04	ID# CK# 6497	TOM F. VAUGHAN 3830 JONES ST. SIOUX CITY IA 51104		$ 200.00	
5-25-04	ID# CK# 12259	RONALD E. BOWDEN 1352 FOX RIDGE TR. SIOUX CITY IA 51104		50.00	
5-25-04	ID# CK# 24122	MARK D. STUCK 5023 COUNTRY CLUB BLVD. SIOUX CITY IA 51104		100.00	
5-27-04	ID# CK# 47838	MILTON AVERY 416 WATER ST SIOUX CITY IA 51103		100.00	
5-27-04	ID# CK# 8925	DOUGLAS PALMER 6 RED FOX RUN SIOUX CITY IA 51104		100.00	
6-8-04	ID# CK# 6390	ROBERT SEFF 3923 COUNTRY CLUB SIOUX CITY, IA 51104		100.00	
6-16-04	ID# CK# 3487	Kevin Vaughan 970 WYNSTONE RD JEFFERSON, SD 57038		250.00	
6-16-04	ID# CK# 2296	STEWART A. HUFF 221 41st ST. SIOUX CITY IA 51104		200.00	
6-23-04	ID# CK# 4793	JACK HALFS 4208 PERRY WAY SIOUX CITY IA 51104		100.00	
7-7-04	ID# CK# 5464	ROBERT BARRON 934 WILLOWS DR. DAKOTA DUNES, SD 57049		50.00	
			SUB-TOTAL	$ 1250.00	
			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) (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.

For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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)*
BATCHELLETR FOR SUPERVISOR

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
7/12/04	ID# CK# 1020	SKIP PERLEY 52A PELLETIER DR. SIOUX CITY, IA 51104		$ 200.00	
7/14/04	ID# CK#	UNITEMIZED CONTRIBUTIONS		25.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	$ 225.00	
			TOTAL *(If last page of this schedule)*	$ 1475.00	

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SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING 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.

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

Batcheller For Supervisor

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
5/20/04	ID# CK# 1008	The Agency Bass 815 Nebraska St. Sioux City, Ia 51101	Advertising/media purchases	$ 697.15
6/08/04	ID# CK# 1009	The Agency Bass 815 Nebraska St. Sioux City, Ia 51101	Advertising/production of print and radio advertising	1026.78
6/21/04	ID# CK# 1010	G.R. Batcheller 413 Victoria Ct. Sioux City, Ia. 51104	Reimburse for stamps	74.00
6/21/04	ID# CK# 1011	Shirley McCormick 3220 Cheyenne Sioux City, Ia. 51104	Labor (mailing, typing, etc.)	100.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$
			TOTAL ***(if last page of this schedule)***	$ 1897.93

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)(l).)

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SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID

☐ CHECK THIS BOX IF AMENDING FORM

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

Batcheller for Supervisor

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD $ 7200.00

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
			$

TOTAL *(PART I)* $ _____

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 $ 7200.00

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