Woodbury

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT

For Office Use Only
Comm. # 17596
Logged In
Scanned
Computer
Audited

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

Calvin Tyer Campaign

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

(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee

CANDIDATE COMMITTEES ONLY:

Candidate Name: Calvin Tyer
Political Party:
Office Sought: Supervisor
District (if Senate or House):

SIGNATURE OF TREASURER (or person filing this report) **TELEPHONE** **DATE SIGNED**

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

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A May 19, 2004 (report date) REPORT FOR AN/A **(1) ELECTION** /**(2)NON-ELECTION** YEAR. Indicate one 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 Notice of Dissolution is filed.)

Local Committees, enter Date of Election: 06/08/2004

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. (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) 3,345.00

Schedule F: Loans Received total (Attach Schedule F) 1,000.00

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

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... $ 4,345.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 2,789.67

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) ..... $ 1,555.33

****UNPAID BILLS** (From Schedule D - Attach Schedule D)..... $ 2,582.97

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... $ 161.59

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)..... $ 1,000.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ☐ YES ☑ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ - 0 -

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	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)*
Calvin Tyer Campaign

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(8), 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
4/5/04	ID# CK#	Calvin Tyer 3287 150th Kingsley, IA 51028	Same Person	$ 1,000.00	
4/5/04	ID# CK#	Shirley DeBuse 754 Robert Dr. Moville, IA 51039	Not Applicable	100.00	
4/5/04	ID# CK#	Gaylen Knaack RR2 Box 2 Correctionville, IA 51016	Not Applicable	35.00	
4/10/04	ID# CK#	Joe Petersen 836 Meadow Dr. Moville, IA 51039	Not Applicable	25.00	
4/10/04	ID# CK#	Shellee Barto 2630 130th St. Moville, IA 51039	Not Applicable	50.00	
4/10/04	ID# CK#	Norma Reinking 1333 Knox Ave Kingsley, IA 51028	Not Applicable	50.00	
4/10/04	ID# CK#	Timothy J. Boyle 600 Stevens Port. Dr Suite 150 Dakota Dunes, SD 57049-5313	Not Applicable	10.00	
4/12/04	ID# CK#	Mrs. Duane Carrington 515 North 5th St. Moville, IA 51039	Not Applicable	30.00	
4/12/04	ID# CK#	Howard M. Logan 309 Jackson St. Box 506 Moville, IA 51039-0506	Not Applicable	50.00	
4/12/04	ID# CK#	Joe King 2378 270th St. Bronson, IA 51007	Not Applicable	25.00	
			SUB-TOTAL	$ 1375.00	
			TOTAL *(If last page of this schedule)*	$	

Calvin Tyer
Karen Wilcof

* 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
☐ 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)*

Calvin Tyen Campaign

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
4/12/04	ID# CK#	Richard C. Engle 3624 Juniper Court Sioux City, IA 51106-4601	Not Applicable	$ 20,00	☐
4/12/04	ID# CK#	Jim Willer 1481 Fayette Ave Lawton, IA 51030-8123	Not Applicable	30,00	☐
4/13/04	ID# CK#	Stee L. Maxwell PO Box 805 Moville, IA 51039-0805	Not Applicable	25,00	☐
4/13/04	ID# CK#	Donald Hamann 304 Division St. Anthon, IA 51004	Not Applicable	50,00	☐
4/13/04	ID# CK#	Barry Loughridge 450 N. Royal Tribon Dakota Dunes, SD 57049	Not Applicable	20,00	☐
4/13/04	ID# CK#	Helen L. Maxwell 123 S. Second St. Box 605 Moville, IA 51039	Not Applicable	50,00	☐
4/13/04	ID# CK#	Robert G. Kendall Box 6 Hornick, IA 51026	Not Applicable	25,00	☐
4/13/04	ID# CK#	Lane Tabke 3112 195th St. Moville, IA 51039	Not Applicable	25,00	☐
4/13/04	ID# CK#	Todd Tabke 34679 C70 Kingsley, IA 51028-8709	Not Applicable	20,00	☐
4/14/04	ID# CK#	Lieber Construction, Inc Jodi Lieber 2024 20 St. Lawton, IA 51030	Not Applicable	50,00	☐

SUB-TOTAL $ 315,00

TOTAL *(If last page of this schedule)* $

Calvin Tyen

Karen Wilcof

* 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
☐ 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)*
Calvin Tyer Campaign

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
4/14/04	ID# CK#	Dorothy L. Schenk 422 Jackson St. Box 195 Moville, IA 51039-0195	Not Applicable	$ 50.00	☐
4/14/04	ID# CK#	Donna K. Beknap 530 Elm St. Moville, IA 51039	Not Applicable	25.00	☐
4/14/04	ID# CK#	Thomas J. Clark, DDS 214 Main St. Box 623 Moville, IA 51039	Not Applicable	75.00	☐
4/14/04	ID# CK#	Sharron K. Hedemark 2525-210th St Moville, IA 51039	Not Applicable	20.00	☐
4/15/04	ID# CK#	Connie Brockhaus 220 Terratam Moville, IA 51039	Not Applicable	10.00	☐
4/15/04	ID# CK#	Charlene Widman 2360 220th St Bronson, IA 51007-8035	Not Applicable	50.00	☐
4/16/04	ID# CK#	Joyce A. Miller 2488 Hancock Ave Anthon, IA 51004-8052	Not Applicable	25.00	☐
4/16/04	ID# CK#	Jim Countryman 2957-150th St. Moville, IA 51039	Not Applicable	50.00	☐
4/20/04	ID# CK#	Mary Wikstrom 2400 Grundy Ave. Hornick, IA 51026	Not Applicable	10.00	☐
4/21/04	ID# CK#	Virginia Reyman 1781 Union Ave. Cushing, IA 51018-8018	Not Applicable	25.00	☐
			SUB-TOTAL	$ 340.00	
			TOTAL *(if last page of this schedule)*	$	

Calvin Tyer
Karen Wilcof

* 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
☐ 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)*
Calvin Tyer Campaign

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
4/21/04	ID# CK#	Becky Venteicher 3345 245th St Anthon, IA 51004	Not Applicable	$ 100.00	☐
4/22/04	ID# CK#	Diane Reinking 3364 150th St Kingsley, IA 51028	Not Applicable	50.00	☐
4/23/04	ID# CK#	John T. Alvey 4315 Perry Way Sioux City, IA 51104	Not Applicable	20.00	☐
4/24/04	ID# CK#	John D. Law 1191 Lee Ave Pierson, IA 51048-8032	Not Applicable	20.00	☐
4/26/04	ID# CK#	Roger L. Wilson 1610 Jasper Ave Moville, IA 51039	Not Applicable	20.00	☐
4/26/04	ID# CK#	Patrick D. Rogers 18 Deer Run Trail Hornick, IA 51026	Not Applicable	100.00	☐
4/27/04	ID# CK#	Nancy L. Burkhart 2657 Lee Ave Oto, IA 51044	Not Applicable	20.00	☐
4/27/04	ID# CK#	Wesley J. Roeschke 2520 140th St Moville, IA 51039	Not Applicable	25.00	☐
4/28/04	ID# CK#	Gail Ploen 1450 Jewell Ave Kingsley, IA 51028	Not Applicable	50.00	☐
4/30/04	ID# CK#	Ann S. Knaack 3894 150th St Correctionville, IA 51016	Not Applicable	15.00	☐

Calvin Tyer
Karen Wilcox

SUB-TOTAL $ 420.00

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). 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
☐ 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)*
Calvin Tyer Campaign

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
5/3/04	ID# CK#	Betty Ruth Ferdig 2321 Garner Ave Hornick, IA 51026-8056	Not Applicable	$ 20.00	
5/4/04	ID# CK#	Selma Mills Box 279 Anthon, IA 51004	Not Applicable	20.00	
5/5/04	ID# CK#	Gene Smith 817 5th St Sloan, IA 51055	Not Applicable	500.00	
5/5/04	ID# CK#	Earl N. Petersen 502 S. 3rd St Anthon, IA 51004	Not Applicable	100.00	
5/8/04	ID# CK#	Anonymous donor (Received by mail)	Not Applicable	5.00	
5/9/04	ID# CK#	Brian Sadler 3448 160th Correctionville, IA 51016	Not Applicable	50.00	
5/12/04	ID# CK#	David E. Schramm 2534 210th St Moville, IA 51039	Not Applicable	25.00	
5/14/04	ID# CK#	Wm. J. Kuebler 325 Howard Road Moville, IA 51039	Not Applicable	25.00	
5/14/04	ID# CK#	Ronald Michener 2575 Ida Ave Anthon, IA 51004-8098	Not Applicable	25.00	
5/15/04	ID# CK#	Rick D. Schneider 10 Heritage Place Sioux City, IA 51106	Not Applicable	25.00	

SUB-TOTAL $ 795.00

TOTAL *(if last page of this schedule)* $ [redacted]

Calvin Tyer
Karen Wilcof

* 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
☐ 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)*
Calvin Tyer Campaign

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
5/15/04	ID# CK#	Eric F. Nelson 1514 Jasper Ave Moville, IA 51039	Not Applicable	$ 100.00	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐

SUB-TOTAL $ 100.00

TOTAL *(if last page of this schedule)* $ 3345.00

Calvin Tyer
Karen Wilcox

* 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 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)*
Calvin Tyer Campaign

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
4/06/04	ID# CK# 1001	US Postal Service 319 Main St. Moville, IA 51039	10 rolls postage stamps	$ 370.00
4/07/04	ID# CK# 1002	Record Printing Co 1117 Villa Ave Sioux City, IA 51103	300 yard signs	349.21
4/15/04	ID# CK# 1003	Calvin Tyer 3287 150th Kingsley, IA 51028	Reimbursement for ramp parking (6 times) security car park 4/15 Sioux City,	108.57
	ID# CK#		Voter registration Computer printout labels (2 cds) $10	
	ID# CK#		1 gal paint, roller, 2 brushes, 2 spray paint from Moville Hdwr $31.49	
	ID# CK#		12 boxes envelopes from Wal-Mart $11.96	
	ID# CK#		1 box Avery labels from Staples $32.10	
	ID# CK#		2 large name badges from Evans Gifts, Kingsley $8.02	

SUB-TOTAL $ 827.78

TOTAL *(If last page of this schedule)* $

Calvin Tyer
Karen Wilcof

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).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

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)*
Calvin Tyer Campaign

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
4/27/04	ID# CK# 1004	Woodbury County Elections Dept 620 Douglas St. Rm 103 Sioux City, IA 51101	1 cd containing list of active republican voters	$ 5.00
5/7/04	ID# CK# 1005	KMNS 1113 Nebraska St. Sioux City, IA 51105	Radio campaign ads Spot Schedule (46 total)	544.00
5/7/04	ID# CK# 1006	KSCJ 2000 Indian Hills Dr Sioux City, IA 51104	Radio campaign ads Spot Schedule (50 total)	518.50
5/17/04	ID# CK# 1007	The Mail House, Inc. 1805 Fourth St. Sioux City, IA 51101	3,686 campaign literature mailings	894.39
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

Calvin Tyer
Karen Wilcox

SUB-TOTAL $ 1,961.89

TOTAL *(If last page of this schedule)* $ 2,789.67

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
☐ CHECK THIS BOX IF AMENDING FORM	

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

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS – SHOW LOANS ON SCHEDULE F)

An "Incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
4/2/04	Moville Record Box AE, 12 S. Second St. Moville, IA 51039	10,000 campaign brochures printed	$ 300.00
4/30/04	Calvin Tyer 3287 150th Kingsley, IA 51028	Sioux City Journal ads 2X2 – 17 total	2,000.00
5/6/04	Moville Record Box AE, 12 S. Second St. Moville, IA 51039	5 newspaper ads (1 column x 6")	200.00
5/13/04	Buy-Rite Signs PO Box 706 Sgt. Bluff, IA 51054	2 sets magnetic name signs (12"x 22")	65.00
5/17/04	Calvin Tyer 3287 150th Kingsley, IA 51028	Wal-Mart 7 boxes envelopes 6.97 Security Car Park Sioux City 11.00 (5 times)	17.97

Calvin Tyer
Karen Wilcof

SUB-TOTAL $ 2,582.97

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD $ 2,582.97

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1 (for Schedule D)

CANDIDATE COMMITTEES NOTE:
*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Reset Form

SCHEDULE E (Rev. 06/97) — IN KIND CONTRIBUTIONS

☐ CHECK THIS BOX IF AMENDING 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
3/25/04	Moville Record Box AE, 12 South Second St. Moville, IA 51039	Not Applicable	Campaign Letter printing - 500 copies	$ 36.59	☐
3/30/04	Scott Masters 14786 Pine Ave Mapleton, IA 51034	Not Applicable	Wire sign holders - 250 @ 50¢	125.00	☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐

Calvin Tyer
Karen Wilcox

SUB-TOTAL $ 161.59

TOTAL (if last page of this schedule) $ 161.59

*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

Page 1 of 1 (for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

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

☐ CHECK THIS BOX IF AMENDING FORM

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

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD $ 0

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
4/5/04	Calvin Tyer 3287 150th Kingsley, IA 51028	Same person	$ 1,000

Calvin Tyer
Karen Wilcox

TOTAL *(PART I)* $ 1,000

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)* $ 0

From Schedule E -- TOTAL LOANS FORGIVEN $

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD $ 1,000.00

*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.

Page 1 of 1
(for Schedule F)

May. 17. 2004 10:37AM AMERICAN NATIONAL BANK No. 6694 P. 13/13