

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	_____
Logged in _____	_____
Scanned _____	_____
Computer _____	_____

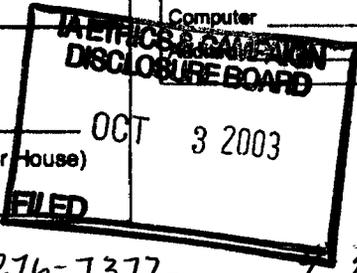
COMMITTEE NAME (Must be same as on Statement of Organization)
DAANE FOR SCHOOL BOARD

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
(8)Support State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name JIM DAANE Political Party _____

Office Sought SCHOOL BOARD District (if Senate or House) _____



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

912-276-7372
TELEPHONE

7-30-03
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 10-1-03 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.
(report date)

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 <u>9-9-03</u>
County & Local Committees, enter County in which Election is held <u>WOODBURY</u>

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.)	\$	<u>200.00</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>2290.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>- 0 -</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>- 0 -</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>2490.00</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....		<u>1985.00</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>- 0 -</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>505.00</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>4068.99</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>- 0 -</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>- 0 -</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>- 0 -</u>

For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

DAANE FOR SCHOOL BOARD

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
9/2/03	ID# CK#	ROLAND JUNCK 671 INDIAN WELLS CT. DAKOTA DUNES, SD 57049		\$ 50 ⁰⁰	<input type="checkbox"/>
9/2/03	ID# CK#	GERALD MCGOWAN 2605 W. SOLWAY SIOUX CITY IA 51104		50 ⁰⁰	<input type="checkbox"/>
9/2/03	ID# CK#	VALORIE J. KRUSE 2504 S. CYPRESS SIOUX CITY IA 51106		50 ⁰⁰	<input type="checkbox"/>
9/2/03	ID# CK#	JACQUELIN GRABOUSKI 4500 STONE BRIDGE POINT SIOUX CITY IA 51106		500 ⁰⁰	<input type="checkbox"/>
9/2/03	ID# CK#	ROBERT HOWLIHAN 600 PIPER JAFFRAY SIOUX CITY IA 51101		100 ⁰⁰	<input type="checkbox"/>
9/4/03	ID# CK#	RICH LEGRAND 4328 PERRY WAY SIOUX CITY IA 51104		100 ⁰⁰	<input type="checkbox"/>
9/4/03	ID# CK#	C.E. WOLFE 4949 COUNTRY CLUB BLVD SIOUX CITY IA 51104		50 ⁰⁰	<input type="checkbox"/>
9/4/03	ID# CK#	E.B. BAKER 2009 CARROLL AVE SFT. BLUFF, IA 51054		50 ⁰⁰	<input type="checkbox"/>
9/4/03	ID# CK#	UNITEMIZED CONTRIBUTIONS		50 ⁰⁰	<input type="checkbox"/>
9/8/03	ID# CK#	DANIEL S. SWANSON 3300 WALDEN AVE SIOUX CITY IA 51106		50 ⁰⁰	<input type="checkbox"/>

SUB-TOTAL

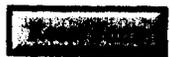
\$ 1050⁰⁰

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



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)
DAANE FOR SCHOOL BOARD

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.

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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
9/8/03	ID# CK#	JAMES DESCHEPPER 4900 RAUINE PARK LN SIOUX CITY IA 51106		\$ 50 ⁰⁰ -	<input type="checkbox"/>
9/8/03	ID# CK#	UNITEMIZED CONTRIBUTIONS		70 ⁰⁰ -	<input type="checkbox"/>
9/9/03	ID# CK#	LANCE D. EMCKE 4908 RAUINE PARK LANE SIOUX CITY IA 51106		50 ⁰⁰ -	<input type="checkbox"/>
9/9/03	ID# CK#	ROSEMARY SHEEHAN 424 PINEHURST TRAIL DAKOTA DUNES, SD 57049		50 ⁰⁰ -	<input type="checkbox"/>
9/4/03	ID# CK#	UNITEMIZED CONTRIBUTIONS		45 ⁰⁰ -	<input type="checkbox"/>
9/10/03	ID# CK#	JOHN AALFS P.O. BOX 3038 SIOUX CITY IA 51104		100 ⁰⁰ -	<input type="checkbox"/>
9/10/03	ID# CK#	CAROL DRILING 4303 LINCOLN WAY SIOUX CITY IA 51106		50 ⁰⁰ -	<input type="checkbox"/>
9/10/03	ID# CK#	E.S. BERAKIS 507-7TH ST SIOUX CITY IA 51101		50 ⁰⁰ -	<input type="checkbox"/>
9/10/03	ID# CK#	STEWART HUFF P.O. BOX 27 SIOUX CITY IA		100 ⁰⁰ -	<input type="checkbox"/>
9/10/03	ID# CK#	FRED DAVENPORT JR 520 NEBRASKA ST SIOUX CITY IA 51101		50 ⁰⁰ -	<input type="checkbox"/>
SUB-TOTAL				\$ 615 ⁰⁰ -	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

DAANE FOR SCHOOL BOARD

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
9/10/03	ID# CK#	UNITEMIZED CONTRIBUTIONS		\$ 120 ⁰⁰ -	<input type="checkbox"/>
9/12/03	ID# CK#	UNITEMIZED CONTRIBUTIONS		70 ⁰⁰ -	<input type="checkbox"/>
9/17/03	ID# CK#	CY CHESTERMAN 1 HARVEST ROAD SIOUX CITY IA 51104		100 ⁰⁰ -	<input type="checkbox"/>
9/17/03	ID# CK#	UNITEMIZED CONTRIBUTIONS		65 ⁰⁰ -	<input type="checkbox"/>
9/22/03	ID# CK#	KEN ACKERMAN 4605 GRAYHAWK RIDGE DR. SIOUX CITY IA 51106		200 ⁰⁰ -	<input type="checkbox"/>
9/22/03	ID# CK#	UNITEMIZED CONTRIBUTIONS		20 ⁰⁰ -	<input type="checkbox"/>
9/25/03	ID# CK#	SUZANNE STEWART 29 WEST 45 TH ST. SIOUX CITY IA 51104		50 ⁰⁰ -	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 625⁰⁰-

TOTAL (if last page of this schedule)

\$ 2290⁰⁰-

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FOR INSTRUCTIONS, SEE BACK OF 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)
DAANE FOR SCHOOL BOARD

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
9/11/03	ID# CK#	POWLSON ADVERTISING 1101-4 th ST SIOUX CITY IA 51101	ADVERTISING - PLACEMENT- DESIGN	\$1985 ⁰⁰
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$1985.00

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.)

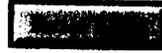
Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
DAANE FOR SCHOOL BOARD

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



**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*
9/9/03	JIM DAANE 4904 RAVINE PARK LN SIOUX CITY IA 51106	"MAIL HOUSE" POSTAGE - MAILING	\$ 296 ⁷⁶ -
9/9/03	JIM DAANE 4904 RAVINE PARK LN SIOUX CITY IA 51106	"MAIL-HOUSE" POSTAGE - MAILING	631 ⁴³ -
9/9/03	JIM DAANE 4904 RAVINE PARK LN SIOUX CITY IA 51106	"MAIL-HOUSE" POSTAGE - MAILING	47 ¹² -
9/4/03	JIM DAANE 4904 RAVINE PARK LN SIOUX CITY IA 51106	ADVERTISING - PLACEMENT DESIGN	1000 ⁰⁰ -
9/22/03	JIM DAANE 4904 RAVINE PARK LN. SIOUX CITY IA 51106	ADVERTISING - PLACEMENT DESIGN	1580 ³⁶ -
8/28/03	JIM DAANE 4904 RAVINE PARK LN. SIOUX CITY IA 51106	RECORD PRINTING FOR "PRINTING"	509 ⁴⁷ -
8/28/03	JIM DAANE 4904 RAVINE PARK LN. SIOUX CITY IA 51106	UNITEMIZED	3 ⁸⁵ -
SUB-TOTAL			\$
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 4068 ⁹⁹ -

*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.