

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE



*Wright*

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

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

COMMITTEE FOR PASSAGE OF BELMOND-KLEMM BOND REFERENDUM

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**IMPORTANT:** Indicate type of committee you are reporting for:  (6)

( 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 _____	Political Party _____
Office Sought _____	District (if Senate or House) _____

Russell A. Talbot (641) 444-4269 03.03.04  
 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 March 4, 2004 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 March 9, 2004
County & Local Committees, enter County in which Election is held <u>Wright, Hancock, &amp; Franklin</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.) ..... \$ 850.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 2,335.00

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 .....** \$ 3,185.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... 2,188.42

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) ..... \$ 996.58

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

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 28.86

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ \_\_\_\_\_

**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 FOR PASSAGE OF BELMOND-KLEMME BOND REFERENI

**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
01-15-04	ID# CK#	Dennis C. Sloth 907 7th Street NE Belmond, IA 50421		\$ 25.00	<input type="checkbox"/>
01-15-04	ID# CK#	Lanette K. Mayberry 102 6th Avenue SW Belmond, IA 50421		20.00	<input type="checkbox"/>
01-19-04	ID# CK#	Curtis Pals 3177 130th Street Belmond, IA 50421		100.00	<input type="checkbox"/>
01-20-04	ID# CK#	Steve Soma 311 2nd Avenue NE Belmond, IA 50421		100.00	<input type="checkbox"/>
01-22-04	ID# CK#	Terri M. Havens 1404 Bel City Lane Belmond, IA 50421		50.00	<input type="checkbox"/>
02-04-04	ID# CK#	Tenold Chiropractic Clinic 406 River Avenue North Belmond, IA 50421-1039		100.00	<input type="checkbox"/>
02-06-04	ID# CK#	Bradley A. Bloemke 1104 Windsor Place Belmond, IA 50421-9740		25.00	<input type="checkbox"/>
02-06-04	ID# CK#	Rose Mickelson 516 7th Street NE Belmond, IA 50421		20.00	<input type="checkbox"/>
02-06-04	ID# CK#	Jennifer A. Peterson 907 4th Avenue NE Belmond, IA 50421		25.00	<input type="checkbox"/>
02-06-04	ID# CK#	Rochelle L. Triggs 904 First Street SE Belmond, IA 50421		50.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 515.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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 <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 FOR PASSAGE OF BELMOND-KLEMMER BOND REFERENDUM

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02-07-04	ID# CK#	Julie A. Kalkwarf 111 Montclare Lane Belmond, IA 50421-9741		\$ 20.00	<input type="checkbox"/>
02-08-04	ID# CK#	Camilla Gabrielson 404 Third Avenue NE Belmond, IA 50421-1228		100.00	<input type="checkbox"/>
02-09-04	ID# CK#	Richard L. Baack 2085 180th Street Klemme, IA 50449		500.00	<input type="checkbox"/>
02-10-04	ID# CK#	Scott Meyer 716 4th Avenue NE Belmond, IA 50421-1336		50.00	<input type="checkbox"/>
02-10-04	ID# CK#	Bradley D. Schoneberg 2960 140th Street Belmond, IA 50421-7505		25.00	<input type="checkbox"/>
02-10-04	ID# CK#	Sharleen Sorum 1035 East Main Street Belmond, IA 50421		100.00	<input type="checkbox"/>
02-10-04	ID# CK#	Heidi Lynn Watne 1203 Youngblood Avenue Meservey, IA 50457		50.00	<input type="checkbox"/>
02-10-04	ID# CK#	Bradley W. Robson 1012 Windsor Place Belmond, IA 50421		200.00	<input type="checkbox"/>
02-10-04	ID# CK#	Cynthia L. Martinek 1412 Bel City Lane Belmond, IA 50421		20.00	<input type="checkbox"/>
02-11-04	ID# CK#	Gary L. Berkland 304 4th Avenue NW Belmond, IA 50421		200.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 1,265.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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<b>SCHEDULE A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
	<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 FOR PASSAGE OF BELMOND-KLEMME BOND REFERENDU

**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
02-11-04	ID# CK#	Tana Boyington 1502 First Street SW Clarion, IA 50525		\$ 20.00	<input type="checkbox"/>
02-11-04	ID# CK#	Cynthia McNulty 215 5th Avenue SE Belmond, IA 50421		5.00	<input type="checkbox"/>
02-11-04	ID# CK#	Katherine E. Simonson 2430 110th Street Kanawha, IA 50447		20.00	<input type="checkbox"/>
02-10-04	ID# CK#	Bonnie H. Leist 1908 Victor Avenue Rowan, IA 50470-7504		20.00	<input type="checkbox"/>
02-18-04	ID# CK#	Melissa J. Sifert 416 10th Avenue NE Belmond, IA 50421		10.00	<input type="checkbox"/>
02-19-04	ID# CK#	Austin Elling 1162 190th Street Hampton, IA 50441		20.00	<input type="checkbox"/>
02-20-04	ID# CK#	Nadyne M. Porter 1547 Belmond Road Belmond, IA 50421		10.00	<input type="checkbox"/>
02-25-04	ID# CK#	James E. Houser 507 2nd Street NE Belmond, IA 50421		100.00	<input type="checkbox"/>
02-26-04	ID# CK#	Bradley W. Robson 1012 Windsor Place Belmond, IA 50421		100.00	<input type="checkbox"/>
02-27-04	ID# CK#	Kinseth Plumbing & Heating 148 East Main Street Belmond, IA 50421		250.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 555.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 2,335.00	

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**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 FOR PASSAGE OF BELMOND-KLEMME BOND REFERENDUM

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE <i>(Disbursement)</i> WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01-27-04	ID# CK# 0001	Iowa Secretary of State Lucas Building, First Floor Des Moines, IA 50319	Voter Registration Records Read, Householded, & Sorted	\$ 67.39
	ID# CK#			
SUB-TOTAL				\$ 67.39
<b>TOTAL (if last page of this schedule)</b>				\$

**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



**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<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 FOR PASSAGE OF BELMOND-KLEMMER BOND REFERENDUM

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
01-29-04	ID# CK# 0002	Belmond Independent 215 East Main Street Belmond, IA 50421	Local Advertising	\$ 140.00
02-04-04	ID# CK# 0003	United States Postal Service 216 First Street NE Belmond, IA 50421	Postage: Stamps 200 @ \$ .37	74.00
02-09-04	ID# CK# 0004	City of Goodell, Iowa Goodell, IA 50439	Rental Fee--Goodell Community Hall; For: Town Meeting (Public Information Meeting)	25.00
02-12-04	ID# CK# 0005	United States Postal Service 216 First Street NE Belmond, IA 50421	Postage: Stamps 200 @ \$ .37	74.00
01-29-04	ID# CK# 0006	The Kanawha Reporter 101 North Main Street Kanawha, IA 50447	Announcement for Public Information Meeting in Klemme	30.00
02-05-04	ID# CK# 0007	Printing Services, Inc. 524 River Avenue North Belmond, IA 50421	Advertising in Reminder	93.60
02-18-04	ID# CK# 0008	(Same as above)	Yard Signs--105	342.30
02-19-04	ID# CK# 0009	(Same as above)	Insertion of Brochures in Reminder	149.70
<b>SUB-TOTAL</b>				<b>\$ 928.60</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>

**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



**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.

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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 COMMITTEE FOR PASSAGE OF BELMOND-KLEMME BOND REFERENDUM

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
02-12-04	ID# CK# 0010	Belmond Independent 215 East Main Street Belmond, IA 50421	Local Advertising	\$ 52.50
02-19-04	ID# CK# 0011	(Same as above)	Local Advertising	218.40
02-26-04	ID# CK# 0012	(Same as above)	Local Advertising	838.00
02-26-04	ID# CK# 0013	(Same as above)	Office Supplies Paper--For Brochures	19.08
02-26-04	ID# CK# 0014	(Same as above)	Job Printing--Brochure Composition & Paper	64.45
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 1,192.43

TOTAL (if last page of this schedule) ~~\$ 2,121.03~~

2,188.42

**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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 COMMITTEE FOR PASSAGE OF BELMOND-KLEMME BOND REFERENDUM



<b>SCHEDULE E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> 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
01-24-04	Carole M. and Bill D. Maske 211 Luick Lane South Belmond, IA 50421		Postage: Stamps 78 @ \$ .37	\$ 28.86	<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"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 28.86	
<b>TOTAL (if last page of this schedule)</b>				\$ 28.86	

\*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.