

FOR INSTRUCTIONS, SEE BACK OF FORM
This form is not applicable to statutory political committees.

IA ETHICS AND CAMPAIGN DISCLOSURE FORM **DR-3** (Rev. 02/96)
NOTICE OF DISSOLUTION
 2009 SEP 23 PM 12:36
For Office Use Only
 Comm. # 6440
 Indexed _____
 Audited _____
 Computer _____
 Certified Date of Dissolution _____

Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

COMMITTEE NAME certified 7009 0080 001 6396 2401 9/21/09

Official Name of Committee
USW PAC LOCAL 11-604
 Street
P.O. BOX 1931
 City, State, Zip Code
MASON CITY, IA 50402-1931
 Area Code Telephone
(641) 494-7566

Effective date of dissolution:

8 Sep 09, ~~49~~ 2009

Randy Solsau
Signature of Treasurer

8 Sep 09
Date Signed

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:
 I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

Signature of Candidate - Required for Candidate's Committee Date signed

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.