

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 05/2002)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1420
Indexed	2
Audited	
Computer	

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

IMPORTANT: Indicate type of committee you are reporting for: pm 7-18

(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 Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name: Ray Holtorf Political Party: Republican
Office Sought: House of Representatives District (if Senate or House): 10

SIGNATURE OF TREASURER (or person filing this report): [Signature] TELEPHONE: 515 388 4179 DATE SIGNED: 7-16-2

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A May 15 - July 14 REPORT FOR AN/A (1) ELECTION //(2) NON-ELECTION YEAR.
(report date) Indicate one

CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election _____
County & Local Committees, enter County in which Election is held _____

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.)

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.)	\$	1205.52
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		945.00
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	2150.52
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ...		2150.52
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)	\$	0
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	31.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	

For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97)	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)
Iowans for Holfort

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
5-17-2	ID# 6004 CK#	AGC of Iowa PAC Box 757 DSM 50303		\$ 500.00	
5-17-2	ID# CK#	Mario Ann Brady Williams 5931 Stewart Dr #1021 IL 60527		100.00	
5-17-2	ID# CK#	Phyllis Lewis 2884 Hwy 30 Denison 51442		100.00	
5-24-2	ID# CK#	Janelle Howe 130 Waltham Keokuk 52632		20.00	
5-24-2	ID# 6351 CK#	Petroleum Marketers of Iowa PAC 1303 50th WDM 50266		200.00	
5-24-2	ID# CK#	Clarcie Thornburg 6806 NW 56th Johnston 50131		25.00	
	ID# CK#				

SUB-TOTAL

TOTAL (if last page of this schedule)

\$
\$ 945.00

* 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) (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

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 (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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
5-16-2	ID# CK# 121	Amazing Mail SCOTSDALE AZ amazingmail.com	Campaign postcards	\$ 880.00
5-17-2	ID# CK# 122	Scandinavian Days Parade Story City IA	Parade entry fee	20.00
5-24-2	ID# CK# 123	Story City Herald Story City IA	ads	180.00
5-25-2	ID# CK# 124	Papa's family cafe COLLINS IA	meet + greet lunch	32.00
5-26-2	ID# CK# 125	Royal Cafe Story City IA	meet + greet lunch	22.00
5-28-2	ID# CK# 126	Victory Store DAVENPORT DAVENPORT IA	Magnets + stickers	310.09
5-31-2	ID# CK# 127	Staples Ames IA	parade candy	25.40
6-27-2	ID# CK# 128	ElectionIDEAS.com	Magnets	375.00
SUB-TOTAL				\$ 1844.49
TOTAL (if last page of this schedule)				\$

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 56.6(3)(i).)

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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 (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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
7-14-2	ID# CK# 129	U ^o ter Blitz.com Augusta Ga	automated phone calls	\$ 231.75
7-14-2	ID# CK# 130	Rhea Holtorf 725 Divison St Jewell IA	mileage for sign delivery	74.28
	ID# CK#			
SUB-TOTAL				\$ 306.03
TOTAL (if last page of this schedule)				\$ 2150.52

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 56.6(3)(i).)

Notice of Dissolution

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

COMMITTEE NAME

Official Name of Committee		
Iowans for Holtorf		
Street		
725 Division St		
City, State, Zip Code		
Jewell IA 50130		
Area Code	Telephone	
515	827 5316	

Effective date of dissolution:

7-16, 20 02
pm 7-18
Signature of Treasurer
7-16-2
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 Iowa Code section 56.42 and rule 851 IAC 4.42.

Chris Holtorf
Signature of Candidate - Required for Candidate's Committee

7/18/02
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. The final bank statement may be sent in later if it is not available at the time the Notice of Dissolution is filed.

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

FORM

(Rev. 02/02)

DR-3 NOTICE OF DISSOLUTION

For Office Use Only

Comm. # 1420
Indexed _____
Audited _____
Computer _____
Certified Date of Dissolution _____