

DISCLOSURE SUMMARY PAGE

DR-2
(Rev. 01/98)

DISCLOSURE
REPORT

For Office Use Only

Comm. # 1340
 Indexed 2
 Audited 9.16.03
 Computer WRS

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

IMPORTANT: Indicate type of committee you are reporting for: 1

(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

Charles A. Sheridan 563/244-0568 WK
 563/243-0293 RES
SIGNATURE OF TREASURER (or person filing this report) **TELEPHONE**

AUGUST 9, 2002
DATE SIGNED

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 DISSOLUTION 10-19-02 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR 10-02
 (report date) Indicate one 1 *pm. 8-10-02*

CHECK IF AMENDMENT TO REPORT DATED _____

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

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.)\$ 52.89

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) --0--

Schedule F: Loans Received total (Attach Schedule F) --0--

Schedule H: Total Sales of Campaign Property (Attach Schedule H) --0--

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 52.89

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 52.89

Schedule F: Loan Repayments total (Attach Schedule F) 52.89

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)\$ --0--

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ 2,947.11

OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$ --0--

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

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)
NICHOLS FOR SENATE

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
07-31-02	ID# CK# 1030	HIGHLAND B. NICHOLS 1954 GLENDALE RD CLINTON IA 52732	PARTIAL LOAN REPAYMENT	\$ 52.89
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 52.89

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).)

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Schedule E of Organization)

NICHOLS FOR SENATE

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
07-31-02	HIGHLAND B. NICHOLS 1954 GLENDALE RD CLINTON IA 52732	CANDIDATE	LOAN FORGIVEN	\$2,947.11	
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$2,947.11	

*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.

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

NICHOLS FOR SENATE

SCHEDULE

F

(Rev. 08/96)

**LOANS
RECEIVED
& REPAID**

CHECK THIS BOX IF
AMENDING FORM

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 3,000.00

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
			\$

TOTAL (PART I) \$ _____

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
7-31-02	HIGHLAND B. NICHOLS 1954 GLENDALE RD CLINTON IA 52732	CANDIDATE	\$ 52.89

TOTAL CASH REPAYMENTS (PART II) \$ 52.89

From Schedule E -- TOTAL LOANS FORGIVEN \$ 2,947.11

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ --0--

*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 when it applies.

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

FORM	(Rev. 02/96)
DR-3	
NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	1340
Indexed	
Audited	9-16-03
Computer	WRS FCL
Certified Date of Dissolution	9-16-03

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	
NICHOLS FOR SENATE	
Street	
1954 GLENDALE RD., PO BOX 1302 CLINTON IA 52732	
City, State, Zip Code	
Area Code	Telephone
563	244-0568

AUG 12 2002
PM 8-10-02

Effective date of dissolution:

AUGUST 9, 2002 _____, 19____

Charles A. Sheiderer

Signature of Treasurer

AUGUST 9, 2002 _____
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.	
<i>Highland B. Nichols</i> _____ Signature of Candidate - Required for Candidate's Committee	JULY 31, 2002 _____ 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.