

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 03/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1469
Logged In	S
Scanned	
Computer	
Audited	

COMMITTEE NAME (Must be same as on Statement of Organization)
Jack Young for House Committee

IMPORTANT: Indicate type of committee you are reporting for: (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: Jack Young Political Party: REPUBLICAN
Office Sought: IOWA HOUSE OF REPRESENTATIVES District (if Senate or House): 30

JUL 21 2003
 PM 7-18
 7/18/03

J. Patricia Deel SIGNATURE OF TREASURER (or person filing this report) 1-319-354-5428 TELEPHONE 7/18/03 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 7-19-03 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.
(report date)

Indicate one Special Election

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
County & Local Committees, enter County in which Election is held

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.) \$ 268.61

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 475.00

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 \$ 743.61

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 174.42

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) \$ 569.19

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

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

**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

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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)
Jack Young for House Committee

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
5/16/03	ID# CK#	Dennis Gordon 33 Lakeview Dr Iowa City IA 52240		\$ 50.00	<input type="checkbox"/>
6/26/03	ID# CK#	John Balmer 10 Princeton Ct Iowa City IA 52245		100.00	<input type="checkbox"/>
6/26/03	ID# CK#	James Wachendorf 103 E College Iowa City IA 52240		100.00	<input type="checkbox"/>
6/26/03	ID# CK#	Deborah Thornton 22 Altuna Rd Santa Fe NM 87508		100.00	<input type="checkbox"/>
6/26/03	ID# CK#	Michael P Stueb 3315 Rohrer Rd Iowa City IA 52246		50.00	<input type="checkbox"/>
7/2/03	ID# CK#	Dorree Eckhoff 1732 Lynncrest Dr Coralville IA		75.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 475.00	
TOTAL (if last page of this schedule)				\$ 475.00	

* 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)
Jack Young for House Committee

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
<i>7/3/03</i>	ID# CK#	<i>Sams club 2605 Blairs Ferry Rd NE Cedar Rapids IA 52402</i>	<i>4th of July Parade Candy</i>	<i>\$ 48.69</i>
<i>7/11/03</i>	ID# CK#	<i>Copy Works 309 2nd ST Coralville IA 52241</i>	<i>Fund solicitation letter</i>	<i>25.73</i>
<i>7/7/03</i>	ID# CK#	<i>Trainer Walsh 414 So. Dubuque #10 Iowa City IA 52240</i>	<i>consultation fee</i>	<i>100.00</i>
	ID# CK#			

SUB-TOTAL \$ *174.42*

TOTAL (if last page of this schedule) \$ *174.42*

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 56.6(3)(i).)

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

SCHEDULE G (Rev. 02/96)	BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
 Jack Young for House Committee

PART I - NAME AND ADDRESS OF CONSULTANT

Name of Consultant Trainor Walsh		
Mailing Address 414 So Dubuque #10		
City Iowa City,	State IA	Zip Code 52240

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From 6/30/03 To 7/7/03	\$ 100.00

ESTIMATES OF PERFORMANCE

To perform general operations of a campaign for State House, coordinate activities and give general advice.

PART II- ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
			\$ -0-

SUB-TOTAL	\$ -0-
TOTAL (If last page of this schedule)	\$ -0-