FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

JUN 2 7 2003

pm 6-26

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT

For Office Use Only
Comm. # 9552
Indexed KH
Audited
Computer

COMMITTEE NAME *(Must be same as on Statement of Organization)* Mahaska County Democratic Women

IMPORTANT: Indicate type of committee you are reporting for: 2

(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

Cheryl G. Benson 641 673-7584 6-27-03

SIGNATURE OF TREASURER (or person filing this report) TELEPHONE 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 July 15, 2003 (report date) REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR. Indicate one ☐

☐ 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.) ..... $ 394.13

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 311.68

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.....$ 705.81

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 0

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) ..... $ 705.81

UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $ 20.00

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

CONTRIBUTIONS – MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Mahaska County Democratic Women

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
5/13/03	ID# CK# cash	Poverty Bag Collection		$ 7.00	
6/03/03	ID# CK# 3348	Margaret Stoltzfus 1214 S 2nd St Osky		25.00	✓
6/04/03	ID# CK# 3586	Frances Walraven 416 S D St Osky		10.00	✓
6/04/03	ID# CK# 6177	Theresa Foster 202 W Glendale Osky		20.00	✓
6/04/03	ID# CK# 1007	Cindy Drost 2175 180th St Osky		10.00	✓
6/5/03	ID# CK# 5733	Rosemary Van Veldhuizen 2287 Lynndale Osky		10.00	✓
6/5/03	ID# CK# 9305	Barbara Hetherington 823 N E St Osky		50.00	✓
6/5/03	ID# CK# 3427	Rose Denny 411 College Hill Ave Osky		10.00	✓
6/6/03	ID# CK# 2666	Harriet Kangilst 915 1st Ave E Osky		10.00	✓
6/7/03	ID# CK# 1186	Cheryl Benson 2685 Jewell Ave Osky		20.00	✓
			SUB-TOTAL	$ 172.00	
			TOTAL *(if last page of this schedule)*	$	

* 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

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

Mahaska County Democratic Women

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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
6-10-03	ID# CK# Cash	Julia Rodemeyer Oskaloosa, IA 52577		$ 10.00	✓
6-10-03	ID# CK# 6205	Bette Dilley 106 Geneva Osky		10.00	✓
6-10-03	ID# CK# 20574	Edna Beal 2532 Bill Bone Dr Osky		10.00	✓
6-10-03	ID# CK# 631	Geri Van Gilst 302 N 10TH Osky		25.00	✓
6-10-03	ID# CK# 2290	Nancy Veldhuizen 2643 325th St Cedar 52543		10.00	✓
6-12-03	ID# CK# 2001	Arlene Wiedmann 312 Keomah Oskaloosa		10.00	✓
6-13-03	ID# CK# 1872	Susan Zajec 2814 Rowland Osky		10.00	✓
6-10-03	ID# CK# Cash	Poverty Bag		9.00	☒
6-17-03	ID# CK# 3820	Francene Hugen 1003 N 1st St Osky		15.00	✓
6-17-03	ID# CK# 4829	Jane Cox 2537 Bill Bone Dr Osky		10.00	✓
			SUB-TOTAL	$ 119.00	
			TOTAL *(if last page of this schedule)*	$	

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CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
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Mahaska County Democratic Women

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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
6-20-03	ID# CK# 2497	Erma Smith 507 5th Av E Osky		$ 10.00	✓
6-21-03	ID# CK# 1083	Florence Vander Meiden 1083 Hwy 102 Pella 50219		10.00	✓
6-03	ID# CK#	Interest on Savings		.68	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 20.00

TOTAL *(if last page of this schedule)* $ 311.68

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COMMITTEE NAME *(Must be same as on Statement of Organization)*
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SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS

☐ 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
5-30-03	Julia Rodemeyer Oskaloosa IA 52577		stamps, stationary, envelopes	$ 20.00	Tea-Bag Fundraiser ✓
			SUB-TOTAL	$ 20.00	
			TOTAL (if last page of this schedule)	$ 20.00	

*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.