

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/88) DISCLOSURE REPORT

COMMITTEE NAME (Must be same as on Statement of Organization)
Wapello County Republican Women's Club

For Office Use Only
Comm. # 9581
Indexed SW
Audited _____
Computer _____

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 State of Candidates

La Rue J. Keith 641 684-8566 10-15-03
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:

OCT 16 2003
PM 10-15
Indicate one (1) ELECTION YEAR (2) NON-ELECTION YEAR

I AM FILING A October 19 2003 REPORT FOR AN/A (1) ELECTION YEAR (2) NON-ELECTION YEAR.
(report date)

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.)\$ 246.29

ADD TOTAL MONEY TAKEN IN THIS PERIOD
Schedule A: Cash Contributions total (Attach Schedule A) none
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\$ _____

SUBTRACT TOTAL MONEY SPENT THIS PERIOD
Schedule B: Expenditures total (Attach Schedule B) 46.50
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)\$ _____

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)\$ 199.79

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

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

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.

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DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
<i>9/8/03</i>	ID# CK# <i>1132</i>	<i>Charlotte Sodey 1 Pennsylvania Place, 003 Ottumwa, IA 52501</i>	<i>Reimburse for meeting room rental \$ 30.00 Flag for The memory unit at Sylvan Woods nursing home \$16.50</i>	<i>\$ 46.50</i>
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				<i>\$ 46.50</i>

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 56.8(3)(1).)