FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 11/97)	DISCLOSURE REPORT

For Office Use Only
Comm. # 727
Indexed
Audited
Computer

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Jack Drake for State Representative

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 Slate of Candidates

Shirley J. Drake — **SIGNATURE OF TREASURER (or person filing this report)**
712-784-3538 — **TELEPHONE**
January 2-04 — **DATE SIGNED**

Penalties Due For Late Filed Reports Range from $10 to $400

RECEIVED JAN 12 2004

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A December 31, 2003 REPORT FOR AN/A (1) **ELECTION** /(2) **NON-ELECTION** YEAR.
(report date) Indicate one [2]

☐ 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.) ..... $ 5878.87

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 3600.32
Schedule F: Loans Received total (Attach Schedule F) ..... none
Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... none

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....$ 9479.19

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 1874.03
Schedule F: Loan Repayments total (Attach Schedule F) ..... none

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... $ 7,605.16

UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $ none
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $ 164.00
OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $ none

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ___ YES X NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ Less Than 500.00

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)*

Jack Drake for State Representative

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
1-9-03	ID# 6078 CK# 1481	Iowa Physical Therapy 1228-8th St. Suite 106 West DesMoines, IA 50265		$ 50.00	
1-10-03	ID# 6059 CK# 2353	IA. Committee of Automotive Retailers 1111 Office Park Rd. West DesMoines, IA. 50265		150.00	
1-11-03	ID# CK#	Lynn Grobe 24869-430th St. Oakland, IA. 51560		25.00	
1-31-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA. 51577		2.04	
2-28-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA. 51577		1.50	
3-31-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA 51577		1.43	
4-30-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA. 51577		1.38	
5-31-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA. 51577		1.83	
6-30-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA 51577		1.70	
7-29-03	ID# 6101 CK# 2342	Motor Carriers P.O. Box 6121 E. DesMoines Stn. DesMoines, IA 50309		100.00	√

SUB-TOTAL $ 334.88

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

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)*
Jack Drake for State Representative

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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
7-29-03	ID# CK#	Susan Cameron 2202 NW 140th St. Clive, IA. 50325		$ 100.00	✓
7-29-03	ID# 6118 CK# 1939	IA. Optometric Assoc 1454-30th St. Ste 204 West Des Moines, IA. 50266		150.00	✓
7-30-03	ID# CK#	Craig Walter 4001 Hickman Des Moines, IA 50322		50.00	✓
7-30-03	ID# 6291 CK# 2241	IHAHS PAC 100 E. Grand AVE. Ste 100 Des Moines, IA 50309		250.00	✓
7-30-03	ID# CK#	Michael Heller 1669 NW 92nd St. Clive, IA 50325		200.00	✓
7-30-03	ID# CK#	Steven Schoenebaum 666 Grand Ave. Des Moines, IA. 50309		200.00	✓
7-30-03	ID# CK#	Diane Reid 1206 E. Franklin Ave. Indianola, IA. 50125		30.00	✓
7-30-03	ID# CK#	David Palmer 213 SW Flynn Dr. Ankeny, IA 50021		50.00	✓
7-30-03	ID# 6058 CK# 2283	IA Chiropractic Society 1605 N. Ankeny Blvd. Ste 100 Ankeny, IA. 50021		100.00	✓
7-30-03	ID# 6096 CK# 1701	Manufactured Housing 1400 Dean Ave. Des Moines, IA. 50316		250.00	✓

SUB-TOTAL $1380.00

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

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For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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 Drake for State Representative

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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
7-30-03	ID# CK#	Andrew Baumert 5068 Coachlight Dr. West Des Moines, IA 50265		$ 25.00	✓
7-30-03	ID# CK#	Drue Sander 4516-513th Ave. Ames, IA. 50014		50.00	✓
7-30-03	ID# 6087 CK# 1191	IA. Telecommuncations Assoc 1601-22nd St. Ste 209 West Des Moines, IA. 50266		100.00	✓
7-30-03	ID# 6234 CK# 003892	IFBF PAC 5400 University Ave West Des Moines, IA 50265		250.00	✓
7-30-03	ID# 6125 CK# 002227	IA. Realtors 999 Oakridge Dr. Des Moines, IA. 50314		100.00	✓
7-30-03	ID# CK#	Bill Sage 406 Oak St. Atlantic IA. 50022		50.00	✓
7-30-03	ID# CK#	Randall Stoecker 2948 Cypress Dr. Ames, IA. 50010		100.00	✓
7-30-03	ID# CK#	Allyson Perry 2005 NE Trilein Dr. Ankeny, IA. 50021		75.00	✓
7-31-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA. 51577		1.33	
8-7-03	ID# 6021 CK# 1640	Credit Union 3737 Westown Pky West Des Moines, IA 50265		250.00	✓

SUB-TOTAL $ 1001.33

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

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For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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 Drake for State Representative

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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
8-7-03	ID# 8052 CK# 4790	Dupont Good Government 400 Locust St. Ste. 800 Des Moines, IA. 50309		$ 200.00	✓
8-15-03	ID# 6027 CK# 2067	Deere PAC Iowa 601 Locust Ste. 325 Des Moines, IA. 50309		250.00	✓
8-31-03	ID# CK#	American Interstate Bank BOX 588 Walnut, IA. 51577		1.65	
9-30-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA. 51577		2.03	
10-20-03	ID# CK#	Jim & Connie Blietz 211 Wildwood Rd. Council Bluffs, IA. 51503		25.00	
10-31-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA. 51577		1.93	
11-4-03	ID# 6146 CK# 1488	Homebuilders Assoc 9001 Hickman Rd. Ste 210 Des Moines, IA. 50322		200.00	
11-30-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA. 51577		1.75	
12-04-03	ID# CK#	American Interstate Bank Box 588 Walnut, IA 51577		.37	
12-23-03	ID# CK#	Craig Neilsen 8620 Titleist Circle Las Vegas, Nevada 89117		150.00	

SUB-TOTAL $ 832.73

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

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For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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 Drake for State Representative

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.

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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
12-24-03	ID# 6078 CK# 1534	Iowa Physical Therapy 1228-8th St, Suite 106 West Des Moines, IA. 50265		$ 50.00	
12-31-03	ID# CK#	Rolling Hills Bank & Trust Box 588 Walnut, IA 51577		1.38	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $51.38

TOTAL *(if last page of this schedule)* $3600.32

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FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE **B** (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

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

Jack Drake for State Representative

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
1-27-03	ID# CK# 949	Republican Party of Iowa 621 E 9th St. Des Moines, IA. 50309	Contribution	$ 500.00
5-13-03	ID# CK# 950	Harlan Newspapers Box 721 Harlan, IA. 51537	2 year Subscription	70.00
6-28-03	ID# CK# 951	Legislative Majority Fund 621 E 9th St. Des Moines, IA. 50309	Contribution	500.00
7-16-03	ID# CK# 952	Cass County Beef Producers 52655 Juniper Rd Lewis, IA 51544	6 beef Ceretificates for County Fair drawing	60.00
8-1-03	ID# CK# 953	KJAN Radio Station Box 389 Atlantic, IA. 50022	8 ads for campaign	63.00
8-21-03	ID# CK# 954	Verizon Cell Phone P.O. Box 790406 St. Louis, MO 63179	Campaign Phone	39.68
9-5-03	ID# CK# 955	Harlan Newpapers Box 721 Harlan, IA. 51537	Web page ad	260.00
9-22-03	ID# CK# 956	Verizon Cell Phone P.O. Box 790406 St. Louis, MO 63179	Campaign Phone	32.58
			SUB-TOTAL	$ 1525.26
			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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE **B** (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

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

Jack Drake for State Representative

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
	ID# CK# 957	Void	error	$ —
10-27-03	ID# CK# 958	Verizon Cell Phone P.O. Box 790406 St. Louis, Mo. 63179	Campaign Phone	26.99
11-19-03	ID# CK# 959	Jack Drake 52462 Juniper Rd Lewis, IA. 51544	Haul Antique Tractor To Parades 208 mi @ $1.00 per mi.	208.00
11-21-03	ID# CK# 960	Verizon Cell Phone P.O. Box 790406 St. Louis, Mo. 63179	Campaign Phone	29.95
11-24-03	ID# CK# 961	The Journal Herald Box 308 Avoca, Iowa 51521	1 year Subscription for Campaign	18.00
11-30 03	ID# CK# 962	Danish Village Voice Box 469 ELK Horn, IA. 51531	1 year Subscription for Campaign	20.00
	ID# CK#	ordered new checks	Bank Changed hand	
12.15.03	ID# CK# 1001	Verizon Cell Phone P.O. Box 790406 St. Louis, Mo. 63179	Campaign Phone	25.03

SUB-TOTAL $ 328.77

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE **B** (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

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

Jack Drake for State Representative

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
12-18-03	ID# CK# 1002	KJAN Radio Station Box 389 Atlantic, IA 50022	4 ads For Campaign	$ 20.00
	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*)	$ 1874.03

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS

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

Jack Drake for State Representative

☐ 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
7-30-03	Mona Bond 2818 West 1st Street Ankeny, IA 50021		Food and Beverage $127.00 Postage + Mailing $37.00	$ 164.00	√
			SUB-TOTAL	$ 164.00	
			TOTAL (If last page of this schedule)	$ 164.00	

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