

DISCLOSURE SUMMARY PAGE

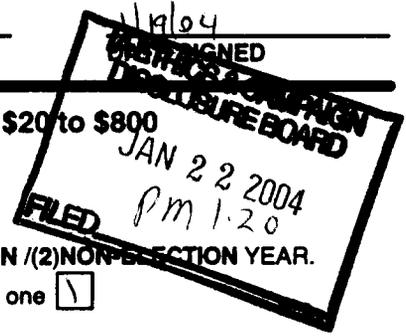
FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1298</u>
Indexed	<u>2</u>
Audited	_____
Computer	_____

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

[Signature] 712/223-1947
SIGNATURE OF TREASURER (or person filing this report) **TELEPHONE**

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 1/22/04 REPORT FOR ANA (1) ELECTION (2) NON-ELECTION YEAR.
 (report date) 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.)\$ 322.32

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 0.00

Schedule F: Loans Received total (Attach Schedule F) 0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 322.32

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 322.32

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)\$ 0.00

UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 0.00

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ 0.00

OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$ 0.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)\$ 0.00

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 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)

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
1/23/03	ID# CK# 1032	Big Brothers Big Sisters of Siouxland 2015 Indian Hills Drive Sioux City IA 51104	Dissolving committee	\$ 320.32
9/30/03	ID# CK# 192417	Signed over to above	Remaining balance issued by Morningside Bank for dissolution of account check assigned to BBBS of Siouxland	2.00
	ID# CK#			

SUB-TOTAL \$ 322.32
TOTAL (if last page of this schedule) \$ 322.32

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
This form is not applicable to statutory political committees.

Notice of Dissolution

FORM	(Rev. 02/98)
DR-3 NOTICE OF DISSOLUTION	
For Office Use Only	
Comm. #	1298
Indexed	_____
Audited	_____
Computer	_____
Certified Date of Dissolution	_____

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of

IA ETHICS CAMPAIGN DISCLOSURE BOARD
JAN 22 2004
FILED PM 1:20

COMMITTEE NAME

Official Name of Committee	
Traders For Statehouse Committee	
Street	
2837 S. Glass St. Sioux City IA 51106	
City, State, Zip Code	
712	223-1947
Area Code	Telephone
() _____	

Effective date of dissolution:

December 31, 2003

James J. Frajin
Signature of Treasurer

12/31/03
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.

[Signature]
Signature of Candidate - Required for Candidate's Committee

12/31/03
Date signed

ITEM 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.