

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1269
Logged In	2
Scanned	
Computer	WRS
Audited	2-3-04

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

 McKinley for State Senate

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

CANDIDATE COMMITTEES ONLY:

Candidate Name	Political Party
Office Sought	District (if Senate or House)

**IA ETHICS & CAMPAIGN
DISCLOSURE BOARD**
 FEB - 2 2004
 pm 1-30
 FILED 1-28-04
 DATE SIGNED

Robert D. Stuenkel
 SIGNATURE OF TREASURER (or person filing this report)

641-774-5222
 TELEPHONE

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 1-1-2003 to 12-31-2003 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.)	\$	1,516.47
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		1,125.00
Schedule F: Loans Received total (Attach Schedule F)		-0-
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		-0-
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	2,641.47
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...		-0-
Schedule F: Loan Repayments total (Attach Schedule F).....		-0-
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	2,641.47
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$	0
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	0
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)..... <i>SLB 6,000.00</i>	\$	0
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	0

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SCHEDULE A (Rev. 07/03)	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)
McKinley for State Senate

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
8/28/03	ID# Cash CK#	Jim and Betty Griffin		\$ 200	<input type="checkbox"/>
8/25/03	ID# 6067 CK# 2963	IA Health PAC #6067 6750 Westown Parkway #100 West Des Moines, IA 50266		200	<input type="checkbox"/>
8/26/03	ID# CK# 7724	Shirley A. Eivins 606 N 7th St Knoxville, IA 50138		200	<input type="checkbox"/>
8/26/03	ID# CK# 1292	Earl Griffin 516 N 7th St Knoxville, IA 50138		500	<input type="checkbox"/>
10/3/03	ID# CK# 4539	Margaret McMath 1210 Eric Drive Knoxville, IA 50138		25	<input type="checkbox"/>
	ID# CK#				<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				\$	
TOTAL (if last page of this schedule)				\$ 1,125	

* 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). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.