

DISCLOSURE SUMMARY PAGE

JAN 16 2004

DR-2
(Rev. 02/96) **DISCLOSURE REPORT**

For Office Use Only

Comm. # 9504
 Indexed
 Audited _____
 Computer

ALLAMAKEE CO. REPUBLICAN WOMENS CLUB
 COMMITTEE NAME (Must be same as on Statement of Organization) pm 1-14-04

REPORTANT: Indicate type of committee you are reporting for: 2
 Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 Support State of Candidates

Ravi Nese 563-568-3340 1-10-04
 NATURE OF TREASURER (or person filing this report) TELEPHONE DATE SIGNED

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

INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

REPORT FILING A January 19, 2004 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate one

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.)\$ 39.22

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 241.00

Schedule C: Fund-raising Events total (Attach Schedule C)..... _____

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\$ 280.22

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)..... 29.00

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)\$ 251.22

PAID BILLS (From Schedule D - Attach Schedule D)\$ _____

UNPAID CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ _____

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

UNPAID COMMITTEES ONLY:

ASSISTANT 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. 02/96)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

ALLAMAKEE CO. REPUBLICAN WOMEN'S CLUB

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
10/24/03	ID# CK#	UNITEMIZED CONTRIBUTIONS FROM BAKE SALE		\$ 112. ⁰⁰
10/24/03	ID# CK#	MEMBERSHIP DUES - RECEIVED 3 @ \$10		30. ⁰⁰
10/24/03	ID# CK#	VOID CK # 422 - IFRW - DID NOT RECEIVE - (RETURNED)		14. ⁰⁰
11/25/03	ID# CK#	UNITEMIZED CONTRIBUTIONS FROM BAKE SALE		35. ⁰⁰
12/6/03	ID# CK#	UNITEMIZED CONTRIBUTIONS FROM BAKE SALE		50. ⁰⁰
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 241. ⁰⁰

* 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.

SCHEDULE B (Rev. 02/96)	MONETARY EXPENDITURES
<input type="checkbox"/> 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)
ALLAMAKEE CO. REPUBLICAN WOMENS CLUB

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (CANDIDATES SEE BELOW & ENTER 1,2,3)	AMOUNT EXPENDED
10/24/03	ID# CK# 423	DIST IV REP WOMEN SHIRLEY SCHNEEBETTER 24 E. MAIN WAUKON, IA 52172	DIST. DUES ()	\$ 1. ⁰⁰
10/24/03	ID# CK# 424	IFRW SALLY ORR 821 FOREST HILL DR CORALVILLE, IA 52244	STATE DUES ()	28. ⁰⁰
	ID# CK#		()	
	ID# CK#		()	
	ID# CK#		()	
	ID# CK#		()	
	ID# CK#		()	
	ID# CK#		()	
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 29. ⁰⁰

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Campaign funds may be used only for:
 (1) campaign purposes,
 (2) constituency expenses, and
 (3) educational and other expenses associated with duties of office.

Please insert the applicable number in the purpose column for each expenditure.

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).)