

DISCLOSURE SUMMARY PAGE

JUL 15 2004
PM 7-15

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1393</u>
Indexed	<u>0</u>
Audited	_____
Computer	_____

COMMITTEE NAME (Must be same as on Statement of Organization)
Berry for Iowa House of Rep.

IMPORTANT: Indicate type of committee you are reporting for: 3

(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

Marj D. Sherwith 319 232-1025 July 15 2004
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:

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

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.) \$ 1415.55

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 2009.00

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..... \$ 3424.55

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 804.30

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) \$ 2620.25

UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 000.00

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 108.48

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 000.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES NO

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

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONEY 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)
Berry for Iowa House of Representatives

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
<i>6/2/04</i>	ID# CK#	<i>Michael D. Blackwell P. O. Box 804 Cedar Falls, IA.</i>		\$ <i>125.00</i>	<input checked="" type="checkbox"/>
<i>6/18/04</i>	ID# CK#	<i>Dorothy L. Sallio 321 E Arlington St. Waterloo, IA 50703-2505</i>		<i>50.00</i>	<input checked="" type="checkbox"/>
<i>6/18/04</i>	ID# CK#	<i>Wilfred M. Johnson 1610 Columbus St. Waterloo, IA 50703-1919</i>		<i>25.00</i>	<input checked="" type="checkbox"/>
<i>6/18/04</i>	ID# CK#	<i>Elizabeth Poole 613 Franklin Cedar Falls, IA 50613</i>		<i>25.00</i>	<input checked="" type="checkbox"/>
<i>6/18/04</i>	ID# CK#	<i>Jeon Seeland 107 Alta Vista Waterloo, IA 50703</i>		<i>20.00</i>	<input checked="" type="checkbox"/>
<i>6/18/04</i>	ID# CK#	<i>Charles Wright P. O. Box 374 Cedar Falls, IA 50613</i>		<i>15.00</i>	<input checked="" type="checkbox"/>
<i>6/18/04</i>	ID# CK#	<i>Alvin Wright 720 Sumner Waterloo, IA 50703</i>		<i>24.00</i>	<input checked="" type="checkbox"/>
<i>6/18/04</i>	ID# CK#	<i>Fish Dinners unitemized contributions</i>		<i>370.00</i>	<input checked="" type="checkbox"/>
<i>7/2/04</i>	ID# CK#	<i>Lou Ann Wortham 841 Cloverdale Ave. Waterloo, IA 50703-1103</i>	<i>sister</i>	<i>20.00</i>	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ <i>674</i>	
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). 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

Reset Form

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)
Berry for Iowa House of Rep.

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
7/9/04	ID# 6356 CK# 1265	Freedom Fund Pac 851 19th St. Des Moines, IA		\$ 100.00	<input checked="" type="checkbox"/>
7/9/04	ID# 6107 CK# 3400	Qwest IPAC 925 High St. 9 South of 9 Des Moines, Iowa 50309		100.00	<input checked="" type="checkbox"/>
7/9/04	ID# 6046 CK# 3799	Justice For All PAC 6046 218 6th Ave., STE. 526 Des Moines, IA 50309		100.00	<input checked="" type="checkbox"/>
7/9/04	ID# 6058 CK# 2411	Iowa Chiropractic Society 1605 N. Ankeny Blvd, Suite 100 Ankeny, IA 50021-4159		100.00	<input checked="" type="checkbox"/>
7/9/04	ID# 10A-PAC CK# 2068	Iowa Optometric Assoc. 1454-30th St. STE. 204 West Des Moines IA 50266		150.00	<input checked="" type="checkbox"/>
7/9/04	ID# 6067 CK# 3127	Iowa Health PAC 6750 Westown Parkway #100 West Des Moines, IA 50266		200.00	<input checked="" type="checkbox"/>
7/9/04	ID# 6429 CK# 2167	Heavy Highway PAC Des Moines, IA 50312 2415 Ingersoll Avenue		200.00	<input checked="" type="checkbox"/>
7/9/04	ID# CK#	Steven J. Quel (Susan J.) 2259 Washington Ave. SE Cedar Rapids, IA 52403		50.00	<input checked="" type="checkbox"/>
7/9/04	ID# CK#	David L. Palmer 213 SW Flynn Dr Ankeny, IA 50021		50.00	<input checked="" type="checkbox"/>
7/9/04	ID# CK#	Marty Ryan 46230 62nd Ave 1 Johnston, IA 50131		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1075	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Berry for Iowa House of Rep.

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
7/9/04	ID# CK#	Judith A. Hoffman 3820 Quebec Street Ames, IA 50014		\$ 25.00	✓
7/9/04	ID# CK#	James P. Obadovich 2418 35th St. Des Moines, IA 50310		20.00	✓
7/9/04	ID# CK#	Susan Judkins 1705 Country Club Rd. Indisnole, IA 50125		15.00	✓
7/13/04	ID# 6096 CK# 1815	Manufactured Housing PAC 1400 Dean Ave. Des Moines, IA 50316		100.00	✓
7/14/04	ID# 6073 CK# 666	Iowa Medical Political Action Com. 1001 Grand Avenue West		100.00	✓
	ID# CK#				
SUB-TOTAL				\$ 260	
TOTAL (if last page of this schedule)				\$ 2009	

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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.

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

Berry for Iowa House of Rep.

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
5/18/04	ID# CK#	Carter Printing 1739 East Grand Ave. Des Moines, Iowa 50316	1,000 Lapel Stickers	\$ 166.42
5/17/04	ID# CK#	Hyvee Food Store Logan Plaza Waterloo, IA 50703	Fish for fish fry	184.00
6/29/04	ID# CK#	Carter Printing 1739 East Grand Ave. Des Moines, IA	Letterhead Re-Election Letter campaign cards	262.28
7/7/04	ID# CK#	Black Hawk Election Office 316 E. 5th Street Waterloo, IA 50703	Print outs	36.50
7/8/04	ID# CK#	Postmaster Wilcox 300 Sycamore St. Waterloo, IA 50703	Mailing of Re-Election Letters	57.67
7/9/04	ID# CK#	Hyvee Food Store Logan Plaza Waterloo, IA	30 copies of Schedule A Monetary Receipts	3.00
7/9/04	ID# CK#	Deborah Berry 241 Madison Waterloo, IA 50703	Reimbursed for paying for Reception (fund-raiser)	94.43
	ID# CK#			
SUB-TOTAL				\$ 804.30
TOTAL (if last page of this schedule)				\$ 804.30

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).)

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Berry for Iowa House of Representatives

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
6/18/04	Joy Lowe 130 Webster St. Waterloo, IA		Spaghetti Sauce, place mats, paper cups, table cloth	26.14	✓
6/18/04	Joy Lowe 130 Webster St. Waterloo, IA 50703		Ground beef Spaghetti Spice	37.28	✓
6/18/04	Ruth Anderson 1503 Newell St Waterloo, IA		Cole slaw	12.00	✓
6/18/04	Vern Brown 2605 Idaho St Waterloo, IA		paper plates plastic forks, knives, + spoons	17.10	✓
6/18/04	Mary Therwith 1242 Beech St Waterloo, IA 50703		Crisco Oil	5.20	✓
6/18/04	Deborah Berry 241 Madison St Waterloo, IA 50703	The Candidate	bread spaghetti	10.76	✓

SUB-TOTAL \$ 108.48
 TOTAL (if last page of this schedule) \$ 108.48

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