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FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

<b>FORM DR-2</b> (Rev. 07/2003)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	1542
Logged In	SW 4T
Scanned	
Computer	
Audited	

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

**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: Don Besch Political Party: Democrat  
 Office Sought: State Representative District (if Senate or House): 8th

Arinda T. Besch  
 SIGNATURE OF TREASURER (or person filing this report) 515 5832355  
 TELEPHONE

pm 7-14  
 JUL 15 2004  
July 14-2004  
 DATE SIGNED

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

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.) ..... \$ 657.79

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 750

Schedule F: Loans Received total (Attach Schedule F) ..... 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... 0

**(Schedule H applies to Candidates' Committees Only)**

**SUB-TOTAL** ..... \$ 1407.79

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... 1407.79

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) ..... \$ 0

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ 0

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 277.08

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ 0

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?)  YES  NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \$ 0

For Instructions, See Back of Form

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SCHEDULE <b>A</b> (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)  
*Don Besch Committee*

**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
May 25-04	ID# CK# 2934	Don Froehlich 318 W South Ave Algona Iowa 50511	wife's uncle	\$ 50	<input type="checkbox"/>
May 25-04	ID# CK# 6383	Don Besch 1407 220 Ave Curwith Ia 50430	Self	250	<input type="checkbox"/>
May 28-04	ID# CK# 1507	Cindy Besch 4221 Village lane APT 5 West Des Moines 50266	Candidate's daughter	250	<input type="checkbox"/>
May 30-04	ID# CK# 5424	James Froehlich 8300 Talbot PL. Johnston Ia 50131	Brother in Law	100	<input type="checkbox"/>
June 2-04	ID# CK# 6396	Don Besch 1407 220 Ave Curwith Ia 50430	Self	100	<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				\$ 750	
<b>TOTAL (if last page of this schedule)</b>				\$ 750	

\* 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.

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 07/03)	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)  
*Don Besch Committee*

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
5/24/04	ID# CK# 1149	Algona Publishing 14 E. Nebraska Box 400 Algona Iowa 50561	4 Political ads 1-3x3 ad 3-2x5 ads Don Besch for State Rep	\$ 228.64
5/24/04	ID# CK# 1150	Humboldt Newspapers 512 Sumner Ave Humboldt Iowa 50548	4 Political ads 1-2x3 ad 3-3x4 ads Don Besch for State Rep	223.50
5/25/04	ID# CK# 1051	West Bend Journal 223 S Broadway West Bend Iowa 50597	2-2x3 ads Political ads 2-2x3 ads 4 Total ads 1-4th Honor 7-West Bend Don Besch for State Rep	67.50
5/26/04	ID# CK# 1052	Pocahontas Record Democrat 218 North Main St Pocahontas Ia 50574	3 Political ads 1-2x3 2-2x5 Don Besch for State Rep	148.00
5/26/04	ID# CK# 1053	The Laurens Sun & Rembrandt Box 125 119 S 3rd St Laurens Iowa 50554	3 Political ads 1-2x3 1/2 2-3x3 Don Besch for State Rep	127.50
5/26/04	ID# CK# 1054	KIGA Radio - Box 160 2102 80th Ave Algona Iowa 50511	2-60 Sec Political ads Don Besch for state Rep Don Besch for state Rep	44.00
5/27/04	ID# CK# 1055	KHBT Humboldt 2196 Montane Ave Box 217 Humboldt Iowa 50548	Political ads 3-60 sec ads -6:15-7AM Don Besch for State Rep	42.00
5/27/04	ID# CK# 1056	KAYL 606 Lake Ave Storm Lake Iowa 50588	2-60 Sec Ads June 3-4 Political Don Besch for state Rep	56.00
SUB-TOTAL				\$ 937.14
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 68A.402(3)(i).)

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 07/03)	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)  
*Don Besch Committee*

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
5/28/04	ID# CK# 1057	KAYL Fm Radio 606 Lake Ave Storm Lake Iowa 50588	6-60 Sec Don Besch State Radio Rep ads Political	\$ 112.00
5/28/04	ID# CK# 1058	KHBT Fm Radio 2196 Montaxe Ave Bnd 17 Humboldt Ia 50548	3-60 Sec Don Besch for Radio State Rep ads Political	42.00
5/30/04	ID# CK# 1059	Lyncha Lynch 215 west Call Box 553 Algona Ia 50511	Proch read Campaign web page	25.00
5/30/04	ID# CK# 1060	Amber Wave 114 North Dodge St Algona Iowa 50511	1/2 hour web site Changing web page	27.50
6/1/04	ID# CK# 1061	Farm News - Messenger Fort Dodge Ia	2x4 Political ad June 4th Paper - Messenger Central Ave Fort Dodge Ia	90.42
6/2/04	ID# CK# 1062	KIGA Radio Box 160 2162 89th Ave Algona Ia 50511	Radio Ads 60 sec - 2 Prime time 30 Sec - 2 Prime time	170.00
7/2/04	ID# CK#	Security State Bank 1 East State Box 340 Algona Iowa 50511	Bank Service Charge on checking account	3.75
	ID# CK#			
SUB-TOTAL				\$470.65
<b>TOTAL (if last page of this schedule)</b>				\$1407.79

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FOR INSTRUCTIONS, SEE BACK OF FORM

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

Don Besch Committee

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SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> 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
5/22/04	Don Besch 1407 220 Ave Corwith Ia 50430	self	wire for campaign signs	\$ 41.08	<input type="checkbox"/>
6/10/04	Don Besch 1407 220 Ave Corwith Ia 50430	self	739 miles at 20	147.80	<input type="checkbox"/>
6/10/04	Don Besch 1407 220 Ave Corwith Ia 50430	self	thank you ads Humboldt News Paper	28.50	<input type="checkbox"/>
6/10/04	Don Besch 1407 220 Ave Corwith Ia 50430	self	thank you ad Pocahontas News Paper	34.20	<input type="checkbox"/>
6/10/04	Don Besch 1407 220 Ave Corwith Ia 50430	self	thank you ad Laurens Sun Reminder	25.50	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 277.08

TOTAL (if last page of this schedule) \$ 277.08

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.