

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/2001)	DISCLOSURE REPORT
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For Office Use Only

Comm. # 1365

Indexed SW TR

Audited _____

Computer _____

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State House

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
(8) Support State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name Ervin A. Dennis Political Party Republican

Office Sought House of Rep. # 19 District (if Senate or House) House

DISCLOSURE REPORT

JUL 12 2004

PM 7-10

7-10-04

Brunelda L. Dennis 319-266-8432 7-10-04

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, 04 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.)\$ 3823.39

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 2135.00

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.....\$ 5958.39

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 4391.89

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)\$ 1566.50

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

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

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 14,110.32

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

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURE
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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.

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State House

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
6-10-04	ID# CK# 1129	Vision Development 1508 Starbuck Circle Cedar Falls, IA 50613	Brochure	\$750. ⁰⁰
6-11-04	ID# CK# 1130	BH County Courthouse 316 E. 5th St. Waterloo, IA 50703-4774	Labels	58.00
6-14-04 6-14-	ID# CK# 1131	LaVada Dennis 1034 W. 15th Cedar Falls, IA 50613	Supplies from staples	105.79
6-15-04	ID# CK# 1132	BH. County Court House 316 E 5th Waterloo, IA 50703	Labels	46.00
6-28-04	ID# CK# 1133	TriAd Greetings + Promotions PO Box 1241 Warrensburg, MO 64093	Flag magnets	862.66
6-28-04 7-1-04	ID# CK# 1134	FRS Industries 64 North 4th St. Jargo, ND 58102	Labels	333.22
7-1-04	ID# CK# 1135	Congdon Printing 115 E. Second St. Cedar Falls, IA.	500 Greetings Brochures	74.90
7-1-04	ID# CK# 1136	LaVada Dennis 1034 W. 15th Cedar Falls, IA.	Supplies from staples	80.34
SUB-TOTAL				\$2310.91
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 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURE
<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)

Dennis for Iowa State House

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
7-9-04	ID# CK# 1137	Parkade Printer Cedar falls IA 50613	Printed brochures	\$ 80.98
07-9-04	ID# CK# 1138	House Majority Fund Des Moines, IA.	Donation	\$ 2000. ⁰⁰
	ID# CK#			

SUB-TOTAL \$ 2080.98
TOTAL (if last page of this schedule) \$ 4391.89

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)(f).)

For Instructions, See Back of 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)
 Dennis for Iowa State House

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
5-08-04	ID# CK# 10526	Beryl - Deena Wellborn 1420 9th Ave Lane Grinnell IA 50112		\$ 25. ⁰⁰	<input type="checkbox"/>
5-12-04	ID# CK# 2915	R. Gene - Mary Ann Gardner 430 46th St. Pl W. Des Moines IA 50265-2967		100.00	<input type="checkbox"/>
5-15-04	ID# CK# 10471	Robert E. Janice M. Dunker 4624 Hawthorne Dr. Sioux City IA 51106		25.00	<input type="checkbox"/>
5-15-04	ID# CK# 4029	Paul - Jay Sires 3825 W. 27th St Cedar Falls IA 50613		50.00	<input type="checkbox"/>
05-19-04	ID# 6027 CK# 2174	Deere Pac Iowa #6027 666 Grand Ave. Suite 1707 Des Moines IA 50309-2507		250.00	<input type="checkbox"/>
05-27-04	ID# 6078 CK# 1581	Iowa Physical Therapy Pac 1228 8th St. Suite 106 West Des Moines IA 50265-2624		300. ⁰⁰	<input type="checkbox"/>
5-29-04	ID# CK# 7141	Lola A. Bartelme 2083 South Ridge Dr. Coralville IA 52241		25. ⁰⁰	<input type="checkbox"/>
06-03-04	ID# CK# 2726	J. H. H. Meier 1932 Orchard Dr. Cedar Falls IA 50613-5741		10. ⁰⁰	<input type="checkbox"/>
06-04-04	ID# CK# 9715	Kirby L. - June Kleffmann 1504 Devitt Muscatine IA 52761		25. ⁰⁰	<input type="checkbox"/>
06-07-04	ID# 6059 CK# 2456	Iowa committee of Auto Retailers 1111 Office Park Rd. West Des Moines IA 50265		250. ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 1060	
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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State House

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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
06-10-04	ID# CK# 7196	Steve - Barb Crittenden 1612 185th St. Creston IA 50801		\$ 50.00	<input type="checkbox"/>
06-12-04	ID# CK#	Cash		20.00	<input type="checkbox"/>
06-14-04	ID# CK# 2019	Harold K - L. Nadine Belken 416 SE Gray St. Des Moines IA 50315 - 1744		50.00	<input type="checkbox"/>
06-16-04	ID# CK# 1076	M. S. Nabul'si 13 Ridgewood Rd. Fort Madison, IA 52627		50.00	<input type="checkbox"/>
06-18-04	ID# CK# 5934	Luane - Loren Lorenzen 1438 T Ave Traer, IA 50675		25.00	<input type="checkbox"/>
06-28-04	ID# CK# 5806	Linus or Elsie Rothmeyer 2209 180th St Calmar, IA 52132		25.00	<input type="checkbox"/>
6-28-04	ID# CK#	Cash		5.00	<input type="checkbox"/>
7-07-04	ID# 1365 CK# 3238	Bankers Unite in Leg. Decision 8800NW 62nd Ave Johnston, IA 50131-6200		300.00	<input type="checkbox"/>
7-08-04	ID# CK# 6506	Monte J. - Sonia McCunniff P.O Box 848 Cedar falls, IA 50613-0848		50.00	<input type="checkbox"/>
7-08-04	ID# CK#	Scott W Bittner 3109 Dallas Dr Cedar Falls, IA 50613		500.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1075	
TOTAL (if last page of this schedule)				\$ 2135	

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COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State House

SCHEDULE F (Rev. 08/96)	LOANS RECEIVED & REPAID
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 14,110.32

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL (PART I) \$ _____

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E -- TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ _____

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