

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1591</u>
Logged In	
Scanned	
Computer	<u>WKS</u>
Audited	<u># 9.7.05</u>

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

David Fry Election Campaign Committee

IMPORTANT: Indicate by # type of committee you are reporting for:

(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party
 (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other
 Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name	Political Party (if applicable)
Dave Fry	Democrat
Office Sought	District (if Senate or House)
State Representative	58

Late reports are subject to possible civil and criminal penalties.

Olson Monson
SIGNATURE OF PERSON FILING REPORT

515-281-7368
TELEPHONE

7/15/04
DATE SIGNED

I AM FILING A July 19 (for May 15 - July 14) REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by #

CHECK IF AMENDMENT TO REPORT DATED 7-15-04

Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 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. (Total of all funds 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.)

\$ 807.27 792.89

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1630.00	<u>2117.00</u>
Schedule F: Loans Received total (Attach Schedule F)	0.00	<u>208.2</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00	

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 2437.27 2874.89

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	1065.99	<u>1065.99</u>
Schedule F: Loan Repayments total (Attach Schedule F)	0.00	

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$ 1843.90 +1371.28

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 0.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 0.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

* added to cash with \$500 on July 14

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)
 David Fry Election Campaign 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
✓ 6-24-04	ID# CK#	Tim Benton 505 State St. Guthrie Center, IA 50115		\$20.00	<input checked="" type="checkbox"/>
✓ 6-24-04	ID# CK#	Gene Blanshan 5135 Panora, IA 50216		10.00	<input checked="" type="checkbox"/>
✓ 6-24-04	ID# CK#	W.W. Cook 323 N.E. 8th Stuart, IA 50250		50.00	<input checked="" type="checkbox"/>
✓ 6-25-04	ID# CK#	Dave Fry 503 N. Fremont Stuart, IA 50250		500.00	<input type="checkbox"/>
✓ 6-24-04	ID# CK#	Mary Garst 1700 130 St. Coon Rapids, IA		250.00	<input checked="" type="checkbox"/>
✓ 6-24-04	ID# CK#	Linda Powell 2063 190 Rd. Guthrie Center, IA		30.00	<input checked="" type="checkbox"/>
✓ 6-24-04	ID# CK#	Paul and Ann Stough 306 E. Main Panora, IA 50216		100.00	<input checked="" type="checkbox"/>
6-24-04	ID# CK#	John Wambold RR#1 Stuart, IA 50250		50.00	<input checked="" type="checkbox"/>
✓ 6-24-04	ID# CK#	Harley and Phyllis Wertz 2837 325 St. Menlo, IA 50164		15.00	<input checked="" type="checkbox"/>
✓ 6-30-04	ID# CK#	Theresa Powell 2386 160th St. Menlo, IA 50164		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1075	
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 checked="" 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)
Dave Fry Election Campaign Committee

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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
6-30-04	ID# CK#	Bob Olson Box 261 Stuart, IA 50250		\$25.00	<input type="checkbox"/>
6-30-04	ID# CK#	Eugene Kading 2929 130 St. Stuart, IA 50250		30.00	<input type="checkbox"/>
7/1-04	ID# CK#	Edward and Janette Lillehoj Box 22 Kimballton, IA		100.00	<input checked="" type="checkbox"/>
7/1-04	ID# CK#	Robert Nelson Box 367 Aduobon, IA		200.00	<input checked="" type="checkbox"/>
7/1/04	ID# CK#	Paul Shonsor 3018 M. Ave Council Bluffs, IA		50.00	<input checked="" type="checkbox"/>
7/1/04	ID# CK#	Peg Smally 612 E Division Audobon, IA		25.00	<input checked="" type="checkbox"/>
7/6/04	ID# CK#	Doug Galiano 115 Harlan Stuart, IA 50250		25.00	<input type="checkbox"/>
7/12/04	ID# CK#	Chris Siebrasse 316 N. Adair Stuart, IA 50250		100.00	<input type="checkbox"/>
	ID# CK#	Guthrie Center Ice Cream Pass the hat Total	102	147.00	<input type="checkbox"/>
	ID# CK#	Stuart Garage Sale White Pole Road		385.00	<input type="checkbox"/>

SUB-TOTAL
1045 \$ 555.00
TOTAL (if last page of this schedule)
\$ 1630.00

2117
2082

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
David Fry Election Campaign 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
6-4-04	ID# CK# 1003	Panorama Casuals 409 E. Market Panora, IA 50216	Campaign t-shirts	\$ 178.08 ✓
6-17-04	ID# CK# 1004	UMYF Greenfield, IA 50849	Popcorn Stand for fundraising event	90.00 ✓
6-18-04	ID# CK# 1005	Carter Printing 1739 E. Grand Des Moines, IA 50316	Cowboy Cards	695.21 ✓
6-23-04	ID# CK# 1006	Activity Center Guthrie Center, IA 50115	Building space for fundraising event	55.00 ✓
7-14-04	ID# CK# 1007	Stuart Post Office Stuart, IA 50250	Postage for Lt. Governor event	47.70 ✓
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1065.99
TOTAL (if last page of this schedule)				\$ 1065.99

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).)

DISCLOSURE SUMMARY PAGE

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FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1591
Logged In	SW dr
Scanned	
Computer	WRS
Audited	10-6-04 e

COMMITTEE NAME (Must be same as on Statement of Organization)
 David Fry Election Campaign Committee

IMPORTANT: Indicate by # type of committee you are reporting for:
 (1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party
 (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other
 Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name: Dave Fry
 Political Party (if applicable): Democrat
 Office Sought: HD
 District (if Senate or House): 58
 State Representative

Late reports are subject to possible civil and criminal penalties.

Alison Monson SIGNATURE OF PERSON FILING REPORT 515-281-7368 TELEPHONE 7/15/04 DATE SIGNED

I AM FILING A July 19 (for May 15 - July 14) REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) *See amended report* Indicate by #

- 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 DR-3 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. (Total of all funds 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.)	\$ 807.27
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1630.00
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ 2437.27
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	1065.99
Schedule F: Loan Repayments total (Attach Schedule F)	0.00
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 1371.28
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 0.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 0.00
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)	\$ 0.00

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)
 David Fry Election Campaign Committee

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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
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6-24-04	ID# CK#	Harley and Phyllis Wertz 2837 325 St. Menlo, IA 50164		15.00	<input checked="" type="checkbox"/>
6-30-04	ID# CK#	Theresa Powell 2386 160th St. Menlo, IA 50164		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1075	
TOTAL (if last page of this schedule)				\$	

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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7/6/04	ID# CK#	Doug Galiano 115 Harlan Stuart, IA 50250		25.00	<input type="checkbox"/>
7/12/04	ID# CK#	Chris Siebrasse 316 N. Adair Stuart, IA 50250		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 555.00	
TOTAL (if last page of this schedule)				\$ 1630.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
David Fry Election Campaign 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
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	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1065.99
TOTAL (if last page of this schedule)				\$ 1065.99

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