*FOR INSTRUCTIONS, SEE BACK OF FORM*

# DISCLOSURE SUMMARY PAGE

JUL 16 2004

| FORM **DR-2** (Rev. 01/98) | DISCLOSURE REPORT |
|---|---|

**For Office Use Only**
Comm. # 731
Indexed SD
Audited
Computer

**COMMITTEE NAME** *(Must be same as on Statement of Organization)* PEOPLE FOR PAM JOCHUM pm 7-15

**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

**SIGNATURE OF TREASURER (or person filing this report)** — **TELEPHONE** 573-588-4714 — **DATE SIGNED** 7-14-04

**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 date) REPORT FOR AN/A (1) **ELECTION** /(2)**NON-ELECTION** YEAR. 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.) ..... $ 390.33

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ..... _____

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**..... $ 390.33

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ..... 0

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) ..... $ 390.33

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

**IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... $ 50.00

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

**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*

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*
PEOPLE FOR PAM JOCHUM

SCHEDULE **E** (Rev. 06/97) — IN KIND CONTRIBUTIONS

☐ 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 |
|---|---|---|---|---|---|
| 06/30/04 | ISEA -PAC # 6086<br>777 THIRD ST.<br>DES MOINES, IA 50309 | | membership Diskette | $ 50.00 | |
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| | | | | | |
| | | | SUB-TOTAL | $ | |
| | | | **TOTAL (if last page of this schedule)** | $ 50.00 | |

*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.

*FOR INSTRUCTIONS, SEE BACK OF FORM*

| SCHEDULE **B** (Rev. 09/97) | MONETARY EXPENDITURES |
|---|---|
| ☐ 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)*
PEOPLE FOR SAM JOCHUM

| 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 |
|---|---|---|---|---|
| | ID#<br>CK# | | | $ |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | ID#<br>CK# | | | |
| | | | SUB-TOTAL | $ |
| | | | **TOTAL (*if last page of this schedule*)** | $ 0 |

**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 Schedule B)

For Instructions, See Back of Form

| SCHEDULE A (Rev. 06/97) | MONETARY RECEIPTS |
|---|---|
| IF ☐ CHECK THIS BOX AMENDING FORM | |

## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*
PEOPLE FOR PAM JOCHUM

**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 |
|---|---|---|---|---|---|
| | ID#<br>CK# | | | $ | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | ID#<br>CK# | | | | |
| | | | SUB-TOTAL | $ | |
| | | | **TOTAL** ***(if last page of this schedule)*** | $ 0 | |

* 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.