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FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM <b>DR-2</b> (Rev. 07/2003)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	1553
Logged In	SW ✓
Scanned	
Computer	
Audited	

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

Committee to Elect Nathan Reichert

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 <u>Nathan Reichert</u>	Political Party <u>Democrat</u>
Office Sought <u>Representative</u>	District (if Senate or House) <u>Ia. House 80</u>

JUL 21 2004  
cert meter

Shawn Savage  
SIGNATURE OF TREASURER (or person filing this report)

563-263-7419  
TELEPHONE

7-15-04  
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 6-2-04 through 7-14-04 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.) ..... \$ 4,430.85

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 3,085.00

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 ..... \$ 7,515.85

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... 2,019.70

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) ..... \$ 5,496.15

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) ..... \$ 1,885.83

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... \$ 929.40

\*\*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

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**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Committee to Elect Nathan Reichert*

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
6/3/04	ID# CK#	Thomas. M. Furlong 1745 231st St. Letts, Ia. 52754		\$ 25.00	<input type="checkbox"/>
6/3/04	ID# CK#	Sondra Smith Coates 287 Ledgewood Drive Fond Du Lac, WI 54935		20.00	<input type="checkbox"/>
6/4/04	ID# CK#	Jo Ann Gillbee 27 Colony Drive Muscatine, Ia. 52761		25.00	<input type="checkbox"/>
6/4/04	ID# CK#	Michael Benson 4637 Glenwood Ave. Everett, WA 98203		100.00	<input type="checkbox"/>
6/4/04	ID# CK#	Judith Q. Collins 2814 Tremont Ave. Davenport, Ia. 52813		25.00	<input type="checkbox"/>
6/4/04	ID# CK#	Anita K. Zahniser 1017 E 3rd St Muscatine, Ia. 52761		50.00	<input type="checkbox"/>
6/23/04	ID# CK#	Raymond W. Hoffmann Jr. 282 S. Paterson Park Ave. Baltimore, MD 21231-2123		50.00	<input type="checkbox"/>
7/1/04	ID# 6356 CK# 1260	Don Paulson 2451 Jasper Ave. Letts, IA 52754		20.00	<input type="checkbox"/>
7/8/04	ID# CK#	Lori K. Beary Freedom Fund PAC 851-19th. Des Moines, Ia 52761		100.00	<input type="checkbox"/>
7/8/04	ID# CK#	Susan L. Dravis 2705 Spinning Wheel Ct. Muscatine, Ia. 52761-2345		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 440.00	
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

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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)  
*Committee to Elect Nathan Reichert*

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
7/8/04	ID# CK#	Vera Edwards 3020 Tipton Rd. Muscatine, Ia. 52761		\$ 50.00	<input type="checkbox"/>
7/8/04	ID# CK#	William P. French 2120 Mulberry Ave. Muscatine, Ia. 52761		25.00	<input type="checkbox"/>
7/8/04	ID# CK#	Brian T. Hahn 3028 Provence Ln. Muscatine, Ia. 52761		50.00	<input type="checkbox"/>
7/8/04	ID# CK#	Thomas R. Kaute 205 Cherry St. Muscatine, Ia. 52761		100.00	<input type="checkbox"/>
7/8/04	ID# CK#	Kathleen M. Kloster 307 Busch St. Muscatine, Ia. 52761		25.00	<input type="checkbox"/>
7/8/04	ID# CK#	Nancy N. Kraft 1514 Magnolia St. Muscatine, Ia. 52761		50.00	<input type="checkbox"/>
7/8/04	ID# CK#	Anne F. Lesnet 309 W. 2nd Muscatine, Ia. 52761		50.00	<input type="checkbox"/>
7/8/04	ID# CK#	Nancy E. White 1375 Ripley Ct. Muscatine, Ia. 52761		20.00	<input type="checkbox"/>
7/8/04	ID# CK#	Robert W. Wilks 1512 Bidwell Rd. Muscatine, Ia. 52761		100.00	<input type="checkbox"/>
7/9/04	ID# CK#	Kathleen K. Bankhead 327 W. 2nd St. Muscatine, Ia. 52761		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 570.00	
TOTAL (if last page of this schedule)				\$	

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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)  
*Committee to Elect Nathan Reichert*

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# CK#	Mary P. Bukta 604 S. 32nd St. Clinton, Ia 52732		\$ 100.00	<input type="checkbox"/>
7/9/04	ID# CK#	Betty L. McMahon 3111 180th St. Muscatine, Ia. 52761		25.00	<input type="checkbox"/>
7/9/04	ID# CK#	Randy Naber 402 Edgth St. Muscatine, Ia. 52761		50.00	<input type="checkbox"/>
7/9/04	ID# CK#	Courtney M. Parrott 1507 Magnolia St. Muscatine, Ia. 52761		50.00	<input type="checkbox"/>
7/9/04	ID# CK#	Gary D. Slight 11 Geneva Drive Muscatine, Ia. 52761		50.00	<input type="checkbox"/>
7/10/04	ID# CK#	Frank B. Hill 2127 Skylane Dr. Muscatine, Ia 52761		25.00	<input type="checkbox"/>
7/10/04	ID# CK#	Frances McRoberts 808 Woodlawn Ave. Muscatine, Ia. 52761		25.00	<input type="checkbox"/>
7/12/04	ID# CK#	Otis Armstrong 108 Spruce St. Muscatine, Ia. 52761		100.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Frank. C. Best Box 127 Columbus City, Ia. 52737		100.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Mark A. Butterworth 1715 Pearlview Ct. Muscatine, Ia. 52761		50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$575.00	
TOTAL (if last page of this schedule)				\$	

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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)  
*Committee to Elect Nathan Reichert*

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
7/12/04	ID# CK#	Rochelle Conway 3284 Hwy 220 Muscatine, Ia. 52761		\$ 50.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Cassandra C. Crews 117 W. 8th St. Muscatine, Ia. 52761		50.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Thomas L. Fiegen 93 Lombard St Clarence, Ia 52216		50.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Janet Kardux 1514 Magnolia Muscatine, Ia. 52761		100.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Eleanor B. McCleary 906 Sunrise Circle Muscatine, Ia. 52761		50.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	J. Faith McCleary 311 Wood Creek Muscatine, Ia. 52761	Mother in Law	100.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Larry C. Meyer 1714 Pearlyview Muscatine, Ia. 52761		100.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Elmer Reichert 3302 Tipton Rd. Muscatine, Ia. 52761	Grand- father	50.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Karl + Linda Reichert 3402 Tipton Rd. Muscatine, Ia. 52761	Parents	100.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Linda S. Reichert 3402 Tipton Rd. Muscatine, Ia. 52761	Mother	250.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 900.00	
TOTAL (if last page of this schedule)				\$	

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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)  
*Committee to Elect Nathaw Reichert*

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
7/12/04	ID# CK#	Rebecca Reichert 1155 Iowa Ave. Muscatine, Ia. 52761	wife	\$ 100.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Douglas Reichert 2741 Oak Dr. Muscatine, Ia. 52761		100.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Marlyn Schepers 413 W. 3rd St. Muscatine, Ia. 52761		50.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Heleen L. VanHoozer 3302 Mackinac St. P.O. Box 1081 - Muscatine, Ia. 52761		100.00	<input checked="" type="checkbox"/>
7/12/04	ID# CK#	Kristine G. Weis 2315 Stonebrook Dr. Muscatine, Ia. 52761		50.00	<input checked="" type="checkbox"/>
7/14/04	ID# CK#	Karl Reichert 3402 Tipton Rd. Muscatine, Ia. 52761	father	200.00	<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				\$600.00	
TOTAL (if last page of this schedule)				\$3085.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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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)

*Committee to Elect Nathan Reichert*

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
6/1/04	ID# CK#	Nathan Reichert 1155 Iowa Ave. Muscatine, Ia 52761	Printer (ink Cartridges	\$70.03
6/1/04	ID# CK#	Same as above	Same as above	70.03
6/24/04	ID# CK#	Carter Printing 1739 E Grand Ave Des Moines, Ia 50316	Yard signs Sign wires	1336.02
6/24/04	ID# CK#	Ia-Democratic Party 5661 Fleur Drive Des Moines, Ia 50321	Van Access fee	250.00
7/6/04	ID# CK#	Carter Printing 1739 E. Grand Ave Des Moines, Ia 50316	Signs	293.62
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$

TOTAL (if last page of this schedule)

\$ 2019.70

**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).)

<b>SCHEDULE D</b> (Rev. 08/98)	<b>INCURRED INDEBTEDNESS</b>
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Committee to Elect Nathan Reichert*

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
4/25/04	Carter Printing 1739 Grand Ave. Des Moines, Ia 50316	Stickers	\$ 293.62
7/1/04	Barnyard Screen Printer 1065 Jackson Street Lisbon, Ia 52253-0188	T-Shirts	190.89
7/6/04	Carter Printing 1739 Grand Ave. Des Moines, Ia 50316	Letterhead Campaign Cards	754.72
7/10/04	Madd Creek Mercantile 216 W. 2nd St. Muscatine, Ia 52701	Restaurant rental & food	646.60
SUB-TOTAL			\$
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1885.83

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**  
 "Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

COMMITTEE NAME (Must be same as on Statement of Organization)  
 Committee to Elect Nathan Reichert

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SCHEDULE E (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
7/1/04	Nathan Reichert 1155 Iowa Ave Muscatine, Ia. 52761	Self	Printer ink Cartridges Card stock	\$ 27.81	<input checked="" type="checkbox"/>
7/1/04	Nathan Reichert 1155 Iowa Ave Muscatine, Ia. 52761	Self	Glue Staples Sknjstks	8.14	<input type="checkbox"/>
7/1/04	Sharon Savage 515 Lorenz Muscatine, Ia. 52761		Printer ink Cartridges	53.78	<input type="checkbox"/>
7/3/04	Ryan Brookhart 176 Ocean View Ave. Mystic, CT. 06355	Brother in law	Envelopes Cartridges	44.70	<input type="checkbox"/>
7/2/04	Karl Reichert 3402 Tipton Road Muscatine, Ia. 52761	Father	Labels	8.52	<input checked="" type="checkbox"/>
7/3/04	Karl Reichert 3402 Tipton Road Muscatine, Ia. 52761	Father	Stamps	187.00	<input checked="" type="checkbox"/>
7/2/04	Nathan Reichert 1155 Iowa Ave. Muscatine, Ia. 52761	Self	Card Stock Cartridge	113.15	<input type="checkbox"/>
7/10/04	Linda Reichert 3402 Tipton Road Muscatine, Ia. 52761	Mother	Film Markers	29.70	<input type="checkbox"/>
7/13/04	Melissa Brookhart 176 Ocean View Ave. Mystic, CT 06355	Sister	ink Cartidge	90.34	<input checked="" type="checkbox"/>
7/13/04	Melissa Brookhart 176 Ocean View Ave. Mystic, CT 06355	Sister	Markers Fed eps	36.26	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 879.40	
TOTAL (if last page of this schedule)				\$ 879.40	

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