

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

Reset Form

<b>FORM DR-2</b> (Rev. 07/2004)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	1558
Logged In	SW ✓
Scanned	
Computer	
Audited	

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

Citizens for Smith

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)
Andrew Smith	Democrat
Office Sought	District (if Senate or House)
Iowa House of Representatives	40

Late reports are subject to possible civil and criminal penalties.

JUL 20 2004

7-19

7119104

*Andrew Smith*  
SIGNATURE OF PERSON FILING REPORT

3194782107  
TELEPHONE

I AM FILING A 07/19/04 REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR.  
(report date) 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.) ..... \$ 266.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) .....	2088.03
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 .....** \$ 2354.03

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....	1073.56
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) ..... \$ 1280.47

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**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)..... \$ 31.12

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 1952.45

**\*\*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) \$ N/A

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)  
Citizens for Smith

**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
05/28/04	ID# Cash CK#	Unitemized N/A N/A		\$10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
SUB-TOTAL				\$ 100.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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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SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Citizens for Smith

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05/28/04	ID# Cash CK#	Unitemized N/A N/A		\$10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		10.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		5.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		5.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		5.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		5.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		5.00	<input type="checkbox"/>
05/28/04	ID# Cash CK#	Unitemized N/A N/A		3.00	<input type="checkbox"/>
05/28/04	ID# 9076 CK# <i>uu4</i>	Grundy Co. Democrats, Treasurer: Ms. Peggy L. Husmann, PO BOX 33, Morrison, IA 50657		100.00	<input type="checkbox"/>
06/07/04	ID# CK# 1002	Patricia Smith, 803 2nd St, Traer, IA 50675	Mother	500.00	<input type="checkbox"/>

SUB-TOTAL

\$ 648.00

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)  
Citizens for Smith

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06/16/04	ID# XCK# 1513	Alan Smith, 1414, 43rd St, Des Moines IA 50311	Father	\$200.00	<input type="checkbox"/>
06/18/04	ID# Cash XCK# —	Dorothy Milligan, 7200 Aurora Ave, Urbandale, IA 50322	Grandmother	135.00	<input type="checkbox"/>
06/18/04	ID# CK# 4311	Patricia Smith, 803 2nd St, Traer, IA 50675	Mother	300.00	<input type="checkbox"/>
06/22/04	ID# XCK# 7433	Ann Michael, 1304 Siegel St., Tama, IA 52339		100.00	<input type="checkbox"/>
06/28/04	ID# XCK# 17948	Duane Lemke, P.O. Box 446, Tama, IA 52339		25.00	<input type="checkbox"/>
06/28/04	ID# XCK# 4338	Raymond Coleman, 104 W Ohio, Tama, IA 52339		25.00	<input type="checkbox"/>
06/28/04	ID# XCK# 6926	Larry Parizek, 2596 V. Ave, Clutier, IA, 52217		25.00	<input type="checkbox"/>
07/01/04	ID# XCK# 2200	Ted Hall, 1317 Thomas Dr., Tama, IA, 52339		25.00	<input type="checkbox"/>
07/01/04	ID# XCK# 0315	L. Parks, 504 Maple St, Garwin, IA, 50632		100.00	<input type="checkbox"/>
07/13/04	ID# 9702 CK# 1514	Via Citizenwhip, Dave Inbody, 6011 Somerset Pl, Johnston, IA 50131; Nancy Thieman, P.O. Box 1264, Storm Lake, IA 50588		20.01	<input type="checkbox"/>

SUB-TOTAL \$ 455.01  
TOTAL (if last page of this schedule) \$ 455.01

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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)  
Citizens for Smith

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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
07/13/04	ID# 9702 CK# 1514	Via Citizenwhip, Dave Inbody, 6011 Somerset Pl, Johnston, IA 50131; Darrell Lewis 119 Fletcher Dr., Clear Lake, IA, 50428		\$10.01	<input type="checkbox"/>
07/13/04	ID# 9702 CK# 1514	Via Citizenwhip, Dave Inbody, 6011 Somerset Pl, Johnston, IA 50131; Alta Price, 4888 School House Rd, Bettendorf, IA 52722		125.01	<input type="checkbox"/>
07/14/04	ID# CK# 6429	Roxanne Conlin, 319 7th St, Des Moines, IA 50309		250.00	<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 385.02	
<b>TOTAL (if last page of this schedule)</b>				\$ 2088.03	

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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)  
Citizens for Smith

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
06/18/04	ID# CK# 1001	U.S. Post Office, 101 N. Main, Traer, IA 50675	Postage	\$ 100.00
06/18/04	ID# CK# 1002	Iowa Telecom, P.O. Box 10481, Des Moines, IA 50306	Campaign Phone	75.36
06/18/04	ID# CK# 1003	US Post Office, 101 N. Main, Traer, IA 50675	Postage	73.30
06/21/04	ID# CK# 1004	Patricia Smith, 803 2nd St, Traer, IA, 50675	Reimbursement for Printer Ink	20.00
06/22/04	ID# CK# 1005	Carter Printing, 1739 E. Grand Ave, Des Moines, IA 50316	Envelopes, Business Cards, Campaign Post Cards, Artwork	704.90
07/02/04	ID# CK# 1006	Chuck Smith, 520 31st St, Oakland, Calif. 94609	Reimbursement for Campaign Signs for 4th of July Parade	100.00
	ID# CK#			
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 1073.56</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 1073.56</b>

**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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Citizens for Smith

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

**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*
07/10/04	AT&T Long Distance, PO BOX 8212, Aurora, IL 60572	Long Distance Telephone Service for Campaign Line	\$ 31.12
SUB-TOTAL			\$ 31.12
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			\$ 31.12

\*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.

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Citizens for Smith

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<b>SCHEDULE E</b> (Rev. 06/97)	<b>IN KIND CONTRIBUTIONS</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

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
06/09/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Website Hosting / E-Mail Account	\$ 24.39	<input type="checkbox"/>
06/18/04	Chuck Smith, 520 31st Oakland, CA 94609	Brother	Artwork	1,500.00	<input type="checkbox"/>
06/18/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Ink Cartridge and Labels	40.00	<input type="checkbox"/>
06/18/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Website Development	200.00	<input type="checkbox"/>
06/21/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Hat	34.67	<input type="checkbox"/>
06/21/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Ink Cartridge and Labels	40.00	<input type="checkbox"/>
06/24/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Ink Cartridge and Labels	40.00	<input type="checkbox"/>
06/24/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Gas	16.00	<input type="checkbox"/>
06/29/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Gas	16.00	<input type="checkbox"/>
07/09/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Website Hosting and E-mail	24.39	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 1,935.45	
<b>TOTAL (if last page of this schedule)</b>				\$	

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FOR INSTRUCTIONS, SEE BACK OF FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 Citizens for Smith

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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
07/15/04	Andrew Smith, 803 2nd St, Traer, IA 50675	Myself	Gas	\$ 17.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 17.00  
 TOTAL (if last page of this schedule) \$ 1,952.45

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