

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

JUL 19 2004  
pm 7-16

FORM <b>DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1357
Indexed	SW JK
Audited	
Computer	

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

SIGNATURE OF TREASURER (or person filing this report) Samy Dixon TELEPHONE 641-664-3380 DATE SIGNED 7/16/04

**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 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.) .....\$ 3025.96

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A)..... 1400.00

Schedule F: Loans Received total (Attach Schedule F)..... 0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... 0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 4425.96

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B)..... 1858.17

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) .....\$ 2567.79

UNPAID BILLS (From Schedule D - Attach Schedule D) .....\$ 1782.45

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ 455.00

OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 1000.00

**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

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

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

<b>COMMITTEE NAME</b> (Must be same as on Statement of Organization) SWAIM FOR HOUSE
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**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
06-07-04	ID# 6429 CK#	Heavy Equipment Highway PAC 2415 Ingersoll Ave Des Moines, IA 50312		\$500.00	
06-17-04	ID# 6070 CK#	Iowa Law PAC 521 E. Locust Des Moines, IA 50309		500.00	
06-23-04	ID# CK#	John Glenn 22890 130th Avenue Centerville, IA 52544		50.00	
06-23-04	ID# CK#	John Humphrey 900 Mikels Drive Centerville, IA 52544		50.00	
06-23-04	ID# 6046 CK#	Justice For All PAC 218 6th Avenue Des Moines, IA 50309		100.00	
06-23-04	ID# 6058 CK#	Iowa Chiropractic Association 1605 N. Ankeny Blvd, Suite 100 Ankeny, IA 50021		100.00	
06-29-04	ID# 6430 CK#	Iowa Rural Water PAC 4221 S. 22nd Ave E Newton, IA 50208		100.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
<b>SUB-TOTAL</b>				<b>\$ 1400.00</b>	
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 1400.00</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) (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.

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	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)  
 SWAIM FOR 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
06-04-04	ID# CK#	Corydon Times Republican 205 W. Jackson Corydon, IA 50060	Advertising	\$ 130.00
06-04-04	ID# CK#	Centerville Iowegian PO BOX 610 Centerville, IA 52544	Advertising	244.02
06-07-04	ID# CK#	Bloomfield Democrat 207 S. Madison Bloomfield, IA 52537	Advertising	63.00
06-10-04	ID# CK#	Wal-Mart 1940 Venture Drive Ottumwa, IA 52501	Candy for Parades	18.10
06-23-04	ID# CK#	Bloomfield Post Office 202 W. Jefferson St Bloomfield, IA 52537	Stamps	37.00
07-01-04	ID# CK#	Larry Dixon (Reimbursement) 623 N. Madison Bloomfield, IA 52537	Candy for Parades	22.63
07-02-04	ID# CK#	Wal-Mart 1940 Venture Drive Ottumwa, IA 52501	Candy for Parades	26.42
07-03-04	ID# CK#	Ottumwa Printing 3013 Birch Ottumwa, IA 52501	Printing Campaign Brochures	1284.00
SUB-TOTAL				\$ 1825.17
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).)

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

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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.

COMMITTEE NAME (Must be same as on Statement of Organization)  
 SWAIM FOR 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
07-12-04	ID# CK#	Ad Express/Iowegian PO BOX 610 Centerville, IA 52544	Newspaper Subscription	\$ 33.00
	ID# CK#			
SUB-TOTAL				\$ 33.00
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 1858.17</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 56.6(3)(i).)

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

Swain For House

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

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING 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*
6/18/2004	Bankers Advertising PO Box 2060 Iowa City, IA 52244	Campaign pens & scratch pads (Pens not received yet)	\$ 1782.45
SUB-TOTAL			\$ 1782.45
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1782.45

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

Page 1 of 1  
(for Schedule D)

**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 services. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or

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

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

DATE RECEIVED (M/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
07-01-04	ISEA - PAC - #6086 777 Third Street Des Moines, IA 50309		District Membership List	\$ 50.00	
07-01-04	Justin Swaim 108½ E. Jefferson Bloomfield, IA 52537	Son	1/4 of Campaign Banner	40.00	
07-01-04	Joshua Swaim 504 N. Davis Bloomfield, IA 52537	Son	1/4 of Campaign Banner	40.00	
07-01-04	Jon Swaim 504 N. Davis Bloomfield, IA 52537	Son	1/4 of Campaign Banner	40.00	
07-01-04	Andrew & Mandy Porter 2746 Meadow Oaks Ct Witcha, Kansas 67220	Son-in-Law & Daughter	1/4 of Campaign Banner	40.00	
06/22/04	Jim Obradovich 2418 35th Street Des Moines, IA 50310		Swaim For House 1/2 Share of Fundraiser Expense	70.00	X
Various	Kurt Swaim 504 N. Davis Bloomfield, IA 52537	Candidate/Self	Mileage	140.00	
Various	Kurt Swaim 504 N. Davis Bloomfield, IA 52537	Candidate/Self	Photocopies	10.00	
Various	Kurt Swaim 504 N. Davis Bloomfield, IA 52537	Candidate/Self	Telephone Toll Charges	25.00	
<b>SUB-TOTAL</b>				\$ 455.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 455.00	

\*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.

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

SCHEDULE <b>F</b> (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 \$ 1,000.00

**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) \$ 0.00

From Schedule E - TOTAL LOANS FORGIVEN \$ 0.00

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,000.00

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