FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT

For Office Use Only
Comm. # 1515
Logged in
Scanned
Computer
Audited

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

Wallace For Iowa House

IMPORTANT: Indicate by # type of committee you are reporting for: 1
(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)
Marc R. Wallace	Democrat
Office Sought	**District (if Senate or House)**
State Representative	68

JUL 28 2004 fat

Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF PERSON FILING REPORT	TELEPHONE	DATE SIGNED
	515-246-5514	7/22/04

I AM FILING A July 19, 2004 (report date) REPORT FOR (1) **ELECTION** /(2)**NON-ELECTION** YEAR.
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 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.) ..... $	600.85
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	880.00
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 ..... $	1480.85
SUBTRACT TOTAL MONEY SPENT THIS PERIOD s/B 284.67	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	1480.85
Schedule F: Loan Repayments total (Attach Schedule F)	1196.18
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3) ..... $	0

****UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... $	0
***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) s/B 824.82 ..... $	0
****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) $ 0

For Instructions, See Back of Form

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

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

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

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
6/5/04	ID# CK#	Irma Iverson 2617 Hull Avenue Des Moines, IA 50317		$5.00	☐
6/6/04	ID# CK#	David Wilkinson 2504 Guthrie Avenue Des Moines, IA 50317		100.00	☐
6/6/04	ID# CK#	Linda Wallace 2429 Tiffin Avenue Des Moines, IA 50317	aunt	100.00	☐
6/6/04	ID# CK#	Ben Tillotson 1505 Guthrie Avenue Des Moines, IA 50316		25.00	☐
6/7/04	ID# CK#	Lewis Pond 2342 Morris Avenue Clovis, CA 93611		50.00	☐
6/8/04	ID# CK#	Marcella Wallace 2429 Tiffin Avenue Des Moines, IA 50317	grandmothe	500.00	☐
6/14/04	ID# 6070 CK# 3017	Iowa LawPac 521 East Locust Des Moines, IA 50309		100.00	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
			SUB-TOTAL	$ 880.00	
			TOTAL *(if last page of this schedule)*	$ 880.00	

* 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

SCHEDULE B (Rev 07/03)	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)*

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
6/11/04	ID# CK#	Direct Marketing Associates 2130 Delaware Avenue Des Moines, IA 50317	sort and prep mail	$ 162.24
6/23/04	ID# CK#	Direct Marketing Associates	sort and prep mail	122.43
7/22/04	ID# CK#	Marc and Karen Wallace	partial repayment of loans See Sch B	1,196.18
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUBTOTAL	$ 1480.85
			TOTAL *(if last page of this schedule)*	$ 1480.85

S/B 284.67

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 Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

SCHEDULE **F** (Rev. 07/03)	**LOANS RECEIVED & REPAID**

☐ 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 $ _____

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.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			$

TOTAL *(PART I)* $ _____

From

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
7/22/04	Marc Wallace	candidate	$ 175.18
7/22/04	Karen Wallace	spouse	1021.00

TOTAL CASH REPAYMENTS *(PART II)* $ 1196.18

Schedule E -- TOTAL LOANS FORGIVEN $ 824.82

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD $ 0

*Disclosure law requires candidate committees todisclose 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 when it applies.

Notice of Dissolution

RECEIVED
JUL 28 2004
fax

FORM (Rev. 07/03)
DR-3
NOTICE OF DISSOLUTION

For Office Use Only
Comm. # 1515
Indexed
Audited
Computer DB
Certified Date of Dissolution

COMMITTEE NAME

Wallace For Iowa House
Official Name of Committee

2127 East 29th Street
Street

Des Moines, IA 50317
City, State, Zip Code

(515) 262-2713
Area Code Telephone

WHEN TO FILE:
The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

7/22/04
Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM
This form is not applicable to statutory political committees.