

Reset Form

DISCLOSURE SUMMARY PAGE

| | |
|------------------------------------|-------------------|
| FORM DR-2 (Rev. 07/2004) | DISCLOSURE REPORT |
| For Office Use Only | |
| Comm. # <u>9691</u> | |
| Logged In <u>SD</u> | <u>JF</u> |
| Scanned _____ | |
| Computer _____ | |
| Audited _____ | |

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

IOWA GREEN PARTY

IMPORTANT: Indicate type of committee you are reporting for: 2

(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)Statewide 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 _____

Office Sought _____ District (if Senate or House) _____

JUL 16 2004
 pm 7-12

SIGNATURE OF TREASURER (or person filing this report) _____ TELEPHONE _____ 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 7/19/04 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.
 (report date) indicate one

[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.) | \$ 644.23 |
| ADD TOTAL MONEY TAKEN IN THIS PERIOD | |
| Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) | 90.00 |
| Schedule F: Loans Received total (Attach Schedule F) | 00.00 |
| Schedule H: Total Sales of Campaign Property (Attach Schedule H) | 00.00 |
| <u>(Schedule H applies to Candidates' Committees Only)</u> | |
| SUB-TOTAL | \$ 734.23 |
| SUBTRACT TOTAL MONEY SPENT THIS PERIOD | |
| Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) | 10.85 |
| Schedule F: Loan Repayments total (Attach Schedule F) | 00.00 |
| CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) | \$ 723.38 |
| <hr/> | |
| **UNPAID BILLS (From Schedule D - Attach Schedule D) | \$ 00.00 |
| **IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) | \$ 00.00 |
| **OUTSTANDING LOANS (From Schedule F - Attach Schedule F) | \$ 1452.00 |
| CANDIDATE COMMITTEES ONLY: | |
| CONSULTANT BREAKDOWN (Schedule G Attached?) | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) | \$ _____ |

For Instructions, See Back of Form

Reset Form

| | |
|---|----------------------|
| SCHEDULE A (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)
IOWA GREEN PARTY

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 |
|--|--|--|--|-----------------|-----------------------------|
| 06/04/04 | ID# CK# EFT | Sarah Davidson 125 W. 9th Street Dubuque, Iowa 52001 | | \$10.00 | <input type="checkbox"/> |
| 06/25/04 | ID# CK# EFT | Ted Pfeiff 18950 Great River Road LeClaire, Iowa 52753 | | 20.00 | <input type="checkbox"/> |
| 06/25/04 | ID# CK# EFT | Tim Harthan 2002 7th Street Emmetsburg, Iowa 50536 | | 20.00 | <input type="checkbox"/> |
| 07/06/04 | ID# CK# EFT | Sarah Davidson 125 W. 9th Street Dubuque, Iowa 52001 | | 10.00 | <input type="checkbox"/> |
| 07/10/04 | ID# CK# 3410 | Mike Wilson 1236 Glencoe Lane Bettendorf, Iowa 52722 | | 30.00 | <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"/> |
| SUB-TOTAL | | | | \$ 90.00 | |
| TOTAL (if last page of this schedule) | | | | \$ 90.00 | |

* 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

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

| | |
|--------------------------------------|--------------------------|
| SCHEDULE B (Rev. 07/03) | MONETARY EXPENDITURES |
|--------------------------------------|--------------------------|

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)
IOWA GREEN PARTY

| 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 |
|--|--|---|--------------------------------|-----------------|
| 06/15/04 | ID# CK#2006 | Zephyr Copies & Design 124 E. Washington Street Iowa City, Iowa 52240 | Black & White Copies | \$ 10.85 |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ 10.85 |
| TOTAL (if last page of this schedule) | | | | \$ 10.85 |

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).)

Reset Form

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

| | |
|---|--|
| SCHEDULE F (Rev. 07/03) | 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 \$ 1452.00

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) \$ 00.00

TOTAL CASH REPAYMENTS (PART II) \$ 00.00
 From Schedule E -- TOTAL LOANS FORGIVEN \$ 00.00
TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1452.00

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