

FOR INSTRUCTIONS, SEE BACK OF FORM

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DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
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COMMITTEE NAME (Must be same as on Statement of Organization)
 Citizens to Re-Elect Wayne Ford

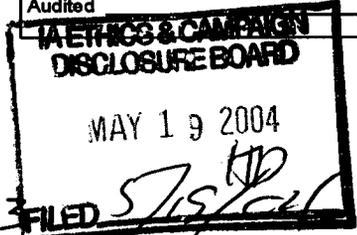
IMPORTANT: Indicate type of committee you are reporting for: 1

- (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 of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name Wayne Ford	Political Party Democrat
Office Sought State Representative	District (if Senate or House) 65

For Office Use Only
 Comm. # 1061
 Logged In SD - H. Ford
 Scanned _____
 Computer _____
 Audited _____



[Signature]
 SIGNATURE OF TREASURER (or person filing this report)

515-274-4413
 TELEPHONE

5/19/04
 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 May 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.)	\$	<u>671.57</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>2,430.00</u>
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	\$	<u>3,101.57</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....		<u>2,768.93</u>
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)	\$	<u>332.64</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>337.69</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	_____
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>300.00</u>
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)	\$	<u>-0-</u>

For Instructions, See Back of Form

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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)
Citizens to Re-Elect Wayne Ford

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
1/6/04	ID# CK# 5631	Earl P. Kelly 2719 Druid Hill Drive Des Moines, IA 50315		\$30.00	<input checked="" type="checkbox"/>
1/6/04	ID# CK# 12332	G. David Hurd 300 Walnut, #163 Des Moines, IA 50309		200.00	<input checked="" type="checkbox"/>
1/6/04	ID# 6052 CK# 2722	Indep. Ins. Agents of IA PAC 4000 Westown Pkwy, Suite 200 West Des Moines, IA 50265		200.00	<input checked="" type="checkbox"/>
1/6/04	ID# 6146 CK# 1531	Homebuilders PAC 3072 104th St Urbandale, IA 50322		100.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK# 7437	David Palmer 213 SW Flynn Drive Ankeny, IA 50021		50.00	<input checked="" type="checkbox"/>
1/8/04	ID# 6082 CK# 912	MidAmerician Energy PAC 666 Walnut Des Moines, IA 50309		100.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK#	Romonda Belcher 2400 Hickman, #112 Des Moines, IA 50310	Fiance	50.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK#	Richard Wright 2830 Ridge Road Des Moines, IA 50312		25.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK#	F. Richard Thornton 666 Walnut, Suite 2500 Des Moines, IA 50309		100.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK#	John W. Johnson 3575 Rimrock Drive Cedar Rapids, IA 52402		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 880.00	
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 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*)
Citizens to Re-Elect Wayne Ford

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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
1/8/04	ID# CK#	Johnathan Neiderbach 642 Polk Blvd. Des Moines, IA 50312		\$25.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK#	Johnathan Wilson 2924 Druid Hill Drive Des Moines, IA 50315		25.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK#	Paulee Lipsman 2880 Grand Ave, #106 Des Moines, IA 50312		75.00	<input checked="" type="checkbox"/>
1/8/04	ID# 6056 CK#	Bankers United PAC 8800 NW 62nd Ave. Johnston, IA 50131		500.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK#	Cecelia Tomlonovic 1245 40th Street Des Moines, IA 50311		25.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK#	Carlos Jayne 3523 SW 37th Des Moines, IA 50321		25.00	<input checked="" type="checkbox"/>
1/8/04	ID# 6046 CK#	Justice for All PAC 218 6th Avenue, Suite 526 Des Moines, IA 50309		100.00	<input checked="" type="checkbox"/>
1/8/04	ID# 6058 CK#	Iowa Chiropractic Society PAC 1605 NW Ankeny Blvd. Ankeny, IA 50021		100.00	<input checked="" type="checkbox"/>
1/8/04	ID# 6445 CK#	River PAC 400 East 3rd Dubuque, IA 52001		100.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK#	L. Keith Madison 4335 Oakwood Lane West Des Moines, IA 50265		250.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1,225.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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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)*
Citizens to Re-Elect Wayne Ford

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
1/8/04	ID# CK# 10463	Herbert Ellis 2534 NW 152nd Clive, IA 50325		\$100.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK# 20311	Stewart Hansen 3010 Sylvania Drive West Des Moines, IA 50266		100.00	<input checked="" type="checkbox"/>
1/8/04	ID# CK# 8935	Jeff Hunter 1000 Walnut Des Moines, IA 50309		100.00	<input checked="" type="checkbox"/>
1/25/04	ID# CK# 5688	Shirley Daniels 1930 Lincoln Ave. Des Moines, IA 50314		25.00	<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"/>
SUB-TOTAL				\$ 325.00	
TOTAL (if last page of this schedule)				\$ 2430.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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 to Re-Elect Wayne Ford

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
1/6/04	ID# CK#1305	Office Max 2700 Ingersoll Ave. Des Moines, IA	Endorsement Stamp	\$ 19.07
1/28/04	ID# CK#1306	Postmaster Des Moines, IA	Stamps	37.00
1/29/04	ID# CK#1307	Wayne Ford 3301 Cottage Grove Ave. Des Moines, IA 50311	Fundraiser Food Reimbursement	907.50
2/6/04	ID# CK#1308	Hoyt Sherman Place 1501 Woodland Avenue Des Moines, IA	Fundraiser Space Rental	305.00
2/6/04	ID# CK#1309	Wayne Ford 3301 Cottage Grove Ave. Des Moines, IA 50311	Web Site Reimbursement	494.25
2/6/04	ID# CK#1310	Wayne Ford 3301 Cottage Grove Ave. Des Moines, IA 50311	Travel Reimbursement	347.70
2/9/04	ID# CK#1311	Carter Printing 1739 East Grand Des Moines, IA	Campaign Stationery	360.71
2/27/04	ID# CK#1312	JTM Multimedia 1421 62nd Street Des Moines, IA 50311	Web Site	98.85
SUB-TOTAL				\$ 2,570.08
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 68A.402(3)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM



SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> 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)
Citizens to Re-Elect Wayne Ford

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
4/6/04	ID# CK#1313	JTM Multimedia 1421 62nd Street Des Moines, IA 50311	Web Site	\$ 98.85
4/6/04	ID# CK#314	Truman Fund	Contribution	100.00
	ID# CK#			
SUB-TOTAL				\$ 198.85
TOTAL (if last page of this schedule)				\$ 2,768.93

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 to Re-Elect Wayne Ford

SCHEDULE D (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.



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*
2/1/04	Top Valu Foods 801 University Avenue Des Moines, IA 50314	Candidate Event	\$ 237.69
3/1/04	Creative Visions 1343 13th Street Des Moines, IA 50314	I'll Make Me A World in Iowa Exhibit Space	100.00
SUB-TOTAL			\$ 337.69
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 337.69

*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.

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SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens to Re-Elect Wayne Ford

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 300.00

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.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
3/17/03	Wayne Ford 3301 Cottage Grove Ave. Des Moines, IA 50311	Same	\$ 300.00

TOTAL (PART I) \$ 300.00

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
			\$

TOTAL CASH REPAYMENTS (PART II) \$ -0-
From Schedule E -- TOTAL LOANS FORGIVEN \$ -0-
TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 300.00

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THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

SCHEDULE H (Rev. 07/03)	CAMPAIGN PROPERTY
ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Citizens to Re-Elect Wayne Ford

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PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY

PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY **

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
10/14/98	Computer	500.00	\$00.00

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 00.00

** PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ _____ TOTALS \$ _____ \$ _____

* If estimated, show est. beside figure.

(Attach Additional Schedules if Needed)