

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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

IMPORTANT: Indicate type of committee you are reporting for: (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 Slate of Candidates

CANDIDATE COMMITTEES ONLY:
Candidate Name: Steven Reed Political Party: 72 Democrat
Office Sought: House of Rep. District (if Senate or House): 72
MAY 14 2004 MD

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1549</u>
Logged in	<u>TRACK</u>
Scanned	
Computer	
Audited	

Steven Reed / Steven Reed
SIGNATURE OF TREASURER (or person filing this report)

641-944-5122
TELEPHONE

5-14-04
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

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.)\$ 0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)\$ 1858.75

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.....\$ 1858.75

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)... 1385.96

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)\$ 472.79

**UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 0

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

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)
Reed for House

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
		<i>mandate Jadinovir</i>			
3-18-04	ID# CK# 180	Maahaska County Democrats Betty V. Dilley (chair) 106 Geneva Dr. Oskaloosa, IA 52577		\$ 200.00	<input checked="" type="checkbox"/>
3-22-04	ID# CK# 2681	PAT BURKE 1301 Edmundson Dr OSKALOOSA, IA 52577		\$100.00	<input checked="" type="checkbox"/>
4-1-04	ID# CK# 6781	DAN E. MURPHY 2678 24th ST OSKALOOSA, IA 52577		\$100.00	<input checked="" type="checkbox"/>
4-5-04	ID# CK# cash	STEVE SALVEY 123 S CLINTON ALBION, IA 52531		\$25.00	<input checked="" type="checkbox"/>
4-12-04	ID# CK# cash	Jodie Hansen 2423 Hwy 671 BUSSEY, IA 50044		\$ 8.75	<input checked="" type="checkbox"/>
4-14-04	ID# CK# 6456	ROBERT W. CONRAD 218 S 2ND PO BOX 541 KNOXVILLE, IA 50138		\$500.00	<input checked="" type="checkbox"/>
4-17-04	ID# CK# 2474	PENNY REED 1010 EAST ST BUSSEY, IA 50044	Wife	\$500.00	<input checked="" type="checkbox"/>
4-22-04	ID# CK# 22237	MICHAEL BRICE 115 1ST AVE. WEST Box 1143 OSKALOOSA, IA 52577		\$ 50.00	<input checked="" type="checkbox"/>
4-22-04	ID# CK# 3776	MELVIN CZINGA 1805 Edmundson Dr OSKALOOSA, IA 52577		\$100.00	<input checked="" type="checkbox"/>
5-1-04	ID# CK# 1015	STAN KIRBY 834 FOX RUN OSKALOOSA, IA 52577		\$25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$1608.75	
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.

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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)

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
5-4-04	ID# CK# 2858	Barbara Rodgers 1205 N Depot KNOXVILLE, IA 50138	Mother	\$ 100.00	<input checked="" type="checkbox"/>
5-5-04	ID# CK# 7525	Debbie Fisher 2005 S 7th OSKALESA, IA 52577		\$ 50.00	<input checked="" type="checkbox"/>
5-5-04	ID# CK# 2855	Susan Alley 216 N 11th St OSKALESA, IA 52577		\$ 100.00	<input checked="" 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				\$ 250.00	
TOTAL (if last page of this schedule)				\$ 1858.75	

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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)

Reed 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
4-6-04	ID# CK#	State bank of Bussey 402 Merrill Bussey IA 50044	From checking for checks on account. direct with drawal	\$ 8.75
4-17-04	ID# CK# 1001	Sign Max 5921 SE. 14th St Suite 1400 Des Moines, IA 50320	2 VINYL SIGNS BANNERS for parades on car. 2'x6'	137.21
4-19-02	ID# CK# 1002	Carter PRINTING 1739 EAST Grand AVE Des Moines, IA 50313	Cowboy cards envelopes Letter heads PRINTING & SHIPPING	779.85
4-19-02	ID# CK# 1003	US post office Bussey Merrill Bussey, IA 50044	Stamps for mailing election materials	\$ 24.65
4-20-02	ID# CK# 1004	The Office Supplier 213 E Main Knoxville, IA 50138	100 copies for fliers for fund raiser	\$ 53.00
5-13-04	ID# CK# 1005	Carter PRINTING 1739 EAST Grand AVE Des Moines, IA 50316	Note pads with letter head for advertising and hand outs	\$ 243.40
5-13-04	ID# CK# 1006	Penny Reed 1010 East St Bussey, IA 50044	add in olbia paper for fund raiser	\$ 39.00
5-13-04	ID# CK# 1007	Dollar General 900 Princeton Dr Albia, IA 52531	Plates, caps, cutlery, napkins, nuts, mustard for fund raiser ¹⁴⁸⁹ ROAST	\$ 29.26
SUB-TOTAL				\$ 1315.12
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)(i).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
Reed 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
<i>5-13-04</i>	ID# CK# <i>1008</i>	<i>Hy-vee Food store Hwy 34 west Elbia, IA 52531</i>	<i>Beans, potatoes, Lemonade tea, pickles, eggs, 50¢ FUNDRAISER HOG ROAST</i>	<i>\$ 70.84</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 70.84</i>
TOTAL (if last page of this schedule)				<i>\$ 1385.96</i>

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 56.8(3)(f).)