

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1561
Indexed	0
Audited	9.23.04 - c
Computer	WRS

COMMITTEE NAME (Must be same as on Statement of Organization)
Sande for House of Representatives
David
 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 Slate of Candidates

Barita Baughman 515-993-3798
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

05-17-04
 DATE FILED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

STATE DISCLOSURE BOARD
 MAY 19 2004
 FAX
 FILED

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 5-19-04 REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR
 (report date) In 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>S/B - 0</u>	\$ <u>380.00</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A)	<u>S/B 1380.00</u>	\$ <u>1,000.00</u>
Schedule F: Loans Received total (Attach Schedule F)		\$ <u>—</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		\$ <u>—</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
	SUB-TOTAL.....	\$ <u>1,380.00</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B)		\$ <u>1,054.80</u>
Schedule F: Loan Repayments total (Attach Schedule F)		\$ <u>—</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)		\$ <u>325.20</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)		\$ <u>2,616.58</u>
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)		\$ <u>—</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)		\$ <u>—</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<u>—</u> YES <u>—</u> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)		\$ <u>—</u>

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1561
Indexed	SW Hatched
Audited	
Computer	

COMMITTEE NAME (Must be same as on Statement of Organization)
Sande for House of Representatives

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

Bonita Baughman 515-993-3798
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

05-17-04
 DATE SIGNED
**IA ETHICS & CAMPAIGN
 DISCLOSURE BOARD**
 MAY 20 2004
 pm 5:19
 FILED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$300

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 5-19-04 REPORT FOR AN/A (ELECTION) / (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.)\$ 380.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)..... 1,000.00

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.....\$ 1,380.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)..... 1,054.80

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)\$ 325.20

UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 2,616.58

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

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

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ YES _____ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

Reset Form

SCHEDULE
A
(Rev. 07/03)

MONETARY
RECEIPTS

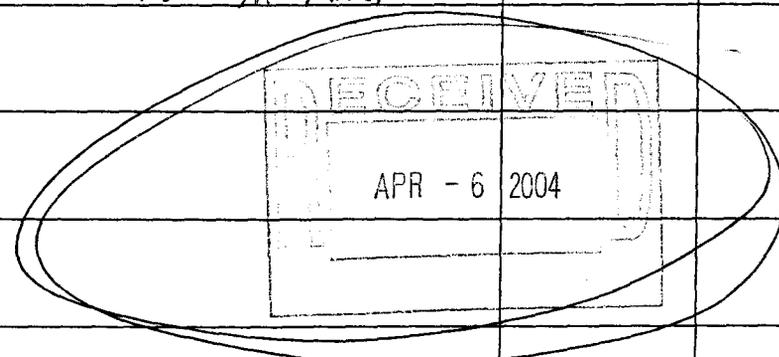
CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Sample for House of Representatives

CHECK THIS BOX IF AMENDING FORM
from voluntary report

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
4/2/04	ID# CK#	David + Nanci Sande 2905 Greenest Adel	Candidate + wife	\$30 ⁰⁰ Cash	<input type="checkbox"/>
4/2	ID# CK#	Mark + Sandra Light 920 Greene St. Adel	friends	100 ⁰⁰	<input type="checkbox"/>
4/3	ID# CK#	Katherine B + Herbert J. Fromm 907 Luna Vista Dr. Escalante Cal.	Acquaintance Friend	50 ⁰⁰	<input type="checkbox"/>
4/3	ID# CK#	Earl + Ruth Sande 515 N. 13th St. Adel	parents	200 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 \$380⁰⁰
TOTAL (if last page of this schedule) \$380⁰⁰

3

* 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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Sande for House OF Representatives

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/YYR)	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
4-10-04	ID# CK#	Barbara K. Lansing 3400 Ravina DR. Des Moines, IA 50313	Friends	\$ 75 ⁰⁰	
4-10-04	ID# CK#	James A. Autry 5007 Woodland Des Moines, IA 50312	Friends	\$ 100 ⁰⁰	
4-17-04	ID# CK#	AARON C. Bone 1800 Grand Ave #211 West Des Moines, IA 50265	Friends	\$ 50 ⁰⁰	
4-19-04	ID# CK#	Dm Daugherty 707 Cottage Adel, Iowa 50003	Friends	\$ 35 ⁰⁰	
4-30-04	ID# CK#	Jim Rees 1410 Sandra Circle Adel, Iowa 50003 MO	Friends	\$ 100 ⁰⁰	
4-30-04	ID# CK#	Lisa Campbell 1410 Sandra Circle Adel, Iowa 50003	Friends	\$ 100 ⁰⁰	
4-30-04	ID# CK#	Mark A. Light 930 Greene St. Adel, Iowa 50003	Friends	\$ 40 ⁰⁰	
4-30-04	ID# CK#	Kathleen M. Ford 16100 Braesgate Dr. Austin, Texas 78717		\$ 100 ⁰⁰	
4-30-04	ID# CK#	David L. Haeber 4363 Wilshire Blvd NO #208 Mound, Minn 55364		\$ 100 ⁰⁰	
5-11-04	ID# CK#	Ruth Fredregill 536 No 13th St. Adel, Iowa 50003	Friends	\$ 35 ⁰⁰	

SUB-TOTAL

\$ 735.00

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Sande for House of Representatives

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
5-11-04	ID# CK#	Ruth E. Koehl 1105 Greene St. Adel, Iowa 50003	Friend	\$ 10 ⁰⁰	
5-11-04	ID# CK#	Mary E. Snow 1414 Grove Adel, Iowa 50003	Friend	\$ 25 ⁰⁰	
5-11-04	ID# CK#	Betty Cherry 108 N. 5th St. Adel, Iowa 50003	Friend	\$ 25 ⁰⁰	
5-11-04	ID# CK#	Keith Soffa 1316 Rapids St. Adel, Iowa 50003	Friend	100 ⁰⁰	
5-11-04	ID# CK#	Mark Lemon 3115 130th Ct. Woodward, IA 50276	Friend	10 ⁰⁰	
5-11-04	ID# CK#	Cathy Jorgensen 1317 Prairie Adel, Iowa 50003	Friend	35 ⁰⁰	
5-11-04	ID# CK#	H.T. Halcomb, DVM 118 South 9th Adel, IA 50003	Friend	50 ⁰⁰	
5-11-04	ID# CK#	Mrs. E.E. Lister 1402 Sycamore, Box 605 Dallas Center, Iowa	Friend	10 ⁰⁰	
	ID# CK#				
	ID# CK#				

SUB-TOTAL \$ 265⁰⁰

TOTAL (if last page of this schedule) \$1000.00

* 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) (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.

FOR INSTRUCTIONS, SEE BACK OF 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.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Sande for House of Representatives

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
5-5-04	ID# CK# 1002	Postmaster - Adel Adel, Iowa	Bulk mailing	\$ 209.33
5-6-04	ID# CK# 1003	Dallas Co. News P.O. Box 190 Adel, Iowa 50003	Ad for fund raiser	\$ 86.80
5-11-04	ID# CK# 1004	Gilcrest/Jewett 1100 Alices Road Waukegan, IA 50263	Lumber for signs	\$ 248.65
5-11-04	ID# CK# 1005	Carter Printing 1739 E. Grand Ave Des Moines IA	Cowboy cards printing	\$ 429.30
5-14-04	ID# CK# 1006	Jim Nore 427 N 11th Pl Adel, Iowa	Food for fund raiser breakfast	\$ 68.78
5-14-04	ID# CK# 1007	Dorothy Powers 1607 Greene St. Adel, Iowa	Food for fund raiser breakfast	\$ 11.94
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 1,054.80
TOTAL (if last page of this schedule) \$ 1,054.80

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Sande for House OF Representatives

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

SCHEDULE D (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*
4-25-04	Dave Sande 2905 Greene St. Adel, Iowa	Envelopes, Labels,	\$ 62.90
4-25-04	Dave Sande 2905 Greene St. Adel, Iowa	Prints, Paper	\$ 86.26
4-25-04	Dave Sande 2905 Greene St. Adel, Iowa	ES B+W 5/5 white	\$ 40.00
5-15-04	Dave Sande 2905 Greene St. Adel, Iowa	Signs printed And banner for fund raiser	\$ 605.21
5-1-04	Dave Sande 2905 Greene St. Adel, Iowa	Yard signs	\$ 1,757.90
5-1-04	Masons Adel Lodge No 86 4115 12 St. Adel, Iowa 50003	use of building for fund raiser	\$ 50.00
4-26-04	Ruth and Earl Sande 515 N. 13th St. Adel, Iowa 50003	Envelopes	\$ 14.31
SUB-TOTAL			\$ 2,616.58
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 2,616.58

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

Page 1 of 1
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

Included 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