

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

ELECTRICAL & CAMPAIGN DISCLOSURE BOARD
MAY 17 2004
pm 5:14
FILED

| | |
|-------------------------------------|----------------------|
| FORM DR-2 (Rev. 01/98) | DISCLOSURE REPORT |
| For Office Use Only | |
| Com. # | 1357 |
| Indexed | SW-tracked |
| Audited | |
| Computer | |

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

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

SIGNATURE OF TREASURER (or person filing this report) *Sammy Swaim* TELEPHONE 641-644-3380 DATE SIGNED 05/14/04

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

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.)\$ 4087.12

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)..... 1150.00

Schedule F: Loans Received total (Attach Schedule F)..... 0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... 0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 5237.12

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)..... 2211.16

Schedule F: Loan Repayments total (Attach Schedule F)..... 0.00

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$ 3025.96

UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 0.00

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ 0.00

OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 1000.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

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

For Instructions, See Back of Form

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

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

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

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 |
|--------------------------|--|--|--|-----------------|-----------------------------|
| 01/03/04 | ID# 6146 CK# 1526 | Homebuilders Association PAC c/o William J. Wimmer Wosher, Orr, Wimmer & Marcouillas, PC Highland Building 4201 Westown Parkway - Suite 250 West Des Moines, IA 50266 | | \$100.00 | |
| | ID# CK# | | | | |
| 01/06/04 | ID# CK# 5432 | James Hayes Plaza Center One, Suite 580 125 South Dubuque Street Iowa City, Iowa 52240 | | 100.00 | |
| 01/08/04 | ID# CK# 1991 | Neven Mulholland 8300 Northwood Avenue Fort Dodge, IA 50501 | | 100.00 | |
| 01/08/04 | ID# 6351 CK# 1149 | Petroleum Marketers of Iowa PAC# 6351 1303 50th West Des Moines, IA 50266 | | 150.00 | |
| 01/11/04 | ID# 8077 CK# 689 | Heartland Regional Council of Carpenters 201 E. 3rd Street Sterling, IL 61081 | | 250.00 | |
| 03/31/04 | ID# CK# 6935 | Brent Mayberry 401 N. Elson Kirksville, MO 63501 | | 250.00 | |
| 05/11/04 | ID# 6060 CK# 2223 | Iowa Committee on Political Education/AFL-CIO 200 Walker, Suite A Des Moines, IA 50317 | | 200.00 | |
| | ID# CK# | | | | |
| | ID# CK# | | | | |

SUB-TOTAL
\$
TOTAL (if last page of this schedule)
\$1150.00

* 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)
SWAIM 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 |
|--|--|--|---|-----------------|
| 01/05/04 | ID# CK# 1083 | Quality Inn 939 3rd Street Des Moines, IA | Rental of Room & Refreshments for Fundraiser in October, 2003 | \$ 99.16 |
| 01/09/04 | ID# CK# 1084 | Ad/Express Iowegian PO BOX 610 Centerville, IA 52544 | Subscription | 33.00 |
| 01/30/04 | ID# CK# 1085 | Corydon Times 205 W. Jackson Corydon, IA 50060 | Subscription | 29.00 |
| 01/30/04 | ID# CK# 1086 | Truman Fund Des Moines, Iowa | contribution | 2000.00 |
| 04/13/04 | ID# CK# 1087 | Tri County Bike Ride c/o Garry Klicker 18695 Unity Trail Bloomfield, IA 52537 | Political Advertising | 50.00 |
| | ID# CK# | | | |
| | ID# CK# | | | |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ |
| TOTAL (if last page of this schedule) | | | | \$ 2211.16 |

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).)

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

| | |
|---|-------------------------------|
| SCHEDULE F (Rev. 08/96) | 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 \$ 1,000.00

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) \$ _____

TOTAL CASH REPAYMENTS (PART II) \$ 0.00

From Schedule E - TOTAL LOANS FORGIVEN \$ 0.00

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,000.00

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