

**DISCLOSURE SUMMARY PAGE**

Reset Form

<b>FORM DR-2</b> (Rev. 07/2003)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	9694
Logged In	kt tracked
Scanned	
Computer	
Audited	

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

Cedar Rapids Physician-Hospital Organization Political Action Committee

**IMPORTANT:** Indicate type of committee you are reporting for:  1  2  3  4  5  6  7

( 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

**CANDIDATE COMMITTEES ONLY:**

Candidate Name \_\_\_\_\_ Political Party \_\_\_\_\_

Office Sought \_\_\_\_\_ District (if Senate or House) \_\_\_\_\_

**ETHICS & CAMPAIGN DISCLOSURE BOARD**

MAY 19 2004

PK 5-18

FILED 5/18/04

DATE SIGNED

Craig R. Schwenfeld  
SIGNATURE OF TREASURER (or person filing this report)

515/283-1801  
TELEPHONE

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**

<b>CASH ON HAND</b> at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount <b>MUST</b> 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.)	\$ 0.00
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	1,850
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
<b>SUB-TOTAL</b> .... \$	1,850.00
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....	0.00
Schedule F: Loan Repayments total (Attach Schedule F).....	0.00
<b>CASH ON HAND</b> at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$ 1,850.00

<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$ 0.00
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$ 0.00
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$ 0.00

**CANDIDATE COMMITTEES ONLY:**

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

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \$ N/A

For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (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)  
Cedar Rapids Physician-Hospital Organization Political Action Committee

**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
1/15/04	ID# CK#	Michael Hirleman 229 Abbotsford Road SE Cedar Rapids, IA 52403		\$500.00	<input type="checkbox"/>
2/15/04	ID# CK#	Yang Ahn 4081 Timberland Drive NW Cedar Rapids, IA 52405		250.00	<input type="checkbox"/>
2/15/04	ID# CK#	David Crumley 216 20th Street NE Cedar Rapids, IA 52402		250.00	<input type="checkbox"/>
3/15/04	ID# CK#	James Johns, Jr. 3728 Northfork Drive Cedar Rapids, IA 52403		250.00	<input type="checkbox"/>
3/15/04	ID# CK#	Julie Thomas 4749 Mount Vernon Road SE Cedar Rapids, IA 52403		500.00	<input type="checkbox"/>
3/15/04	ID# CK#	Gerald Shirk 3414 Ellwinn Lane SE Cedar Rapids, IA 52403		100.00	<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				\$ 1,850.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 1,850.00	

\* 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.