

DISCLOSURE SUMMARY PAGE

RECEIVED
DISCLOSURE REPORT
OCT 18 2004
JD

FORM DR-2 Rev. 01/98	DISCLOSURE REPORT
For Office Use Only	
Comm. #	7105
Indexed	SW
Audited	
Computer	

COMMITTEE NAME (Must be same as on Statement of Organization) **FILED**
PAUL BELL For State Representative

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

Paul Bell 641-792-9514 10-17-04
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE DATE SIGNED

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 OCT. 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.) \$ 3975.39

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 7760.00

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 \$ 11,735.39

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 5,050.43

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) \$ 6,684.96

UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 1924.00

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) \$ 500.00

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)
Paul Bell For State Representative

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
X 07-16-04	ID# 6237 CK# 1616	Abate PAC 3118 Eastern Ave. NE. Cedar Rapids, Ia. 52402	PAC	\$ 250.00	
X 07-19-04	ID# 6116 CK# 1278	Political Action Ia. Dealers P.O. Box 65840 West Des Moines, Ia. 50265	PAC	\$ 125.00	
Y 07-21-04	ID# CK# 1094	Fred HASKINS 505 - 5th St. Suite 729 Des Moines, Ia. 50309		\$ 10.00	
X 07-26-04	ID# CK# 3984	LaVerne Schrage 3208 S.W. 34th St. Des Moines, Ia. 50321		\$ 25.00	
Y 07-26-04	ID# 6073 CK# 684	Iowa Medical Political Action Comm. 1001 Grand Ave. West Des Moines, Ia. 50265	PAC	\$ 150.00	
X 07-26-04	ID# 6084 CK# 739	Iowa St. UAW-PAC 2700 S. River Rd Ste. 200 Des Plaines, Ill. 60018	PAC	\$ 250.00	
X 08-03-04	ID# 6486 CK# 1439	Iowa Telecom PAC 115 S. 2nd Ave. W. Newton, Ia. 50258	PAC	\$ 200.00	
X 08-07-04	ID# 6038 CK# 00119	Verizon Ia. St. Good Gov't 11 Eleventh Ave. Suite #2 Grinnell, Ia. 50112	PAC	\$ 100.00	
X 08-12-04	ID# 6021 CK# 1775	Credit Union PAC 3737 Westown Parkway W. Des Moines, Ia. 50266	PAC	\$ 150.00	
08-17-04	ID# 6059 CK# 2518	Iowa Committee of Automobile Dealers 1111 Office Park Rd. West Des Moines, Ia. 50265	PAC	\$ 300.00	
SUB-TOTAL				\$ 1560	
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) (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.

SCHEDULE A (Rev. 06/97)	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)
Paul Ball For State Representative

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.

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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
08-19-04	ID# CK# 1607	MAYTAG Dependability Fund 403 W. 4th St. W. Newton, Ia. 50208	PAC	\$ 250.00	
08-20-04	ID# CK# 434	Associated General Contractors 701 E. Court Ave. Des Moines, Ia. 50309	PAC	\$ 1,000.00	
08-20-04	ID# CK#	Brad + Mary Morath	Friend	\$ 300.00	
08-30-04	ID# 6291 CK# 2274	IHA PAC 100 E. Grand Suite 100 Des Moines, Ia. 50309	PAC	\$ 250.00	
09-12-04	ID# 6062 CK# 181	Iowa Certified Public Accountants 950 OFFICE PARK RD. ST# 300 West Des Moines Ia. 50265	PAC	\$ 200.00	
09-18-04	ID# 6019 CK# 0582	CWA LOCAL 7102 3612 S.W. 9th Street Des Moines, Ia - 50315	PAC	\$ 100.00	
09-19-04	ID# 6052 CK# 2811	INDEPENDENT INS. AGENTS OF IOWA 4000 Westown PKY STE# 200 West Des Moines, Ia. 50265	PAC	\$ 200.00	
09-25-04	ID# CK# 1328	Well PAC 636 Grand Avenue station 13 Des Moines, Ia. 50309	PAC	\$ 250.00	
09-25-04	ID# CK# 07389	IBEW 1125 15th St. N.W. Washington D.C.	PAC	\$ 100.00	
09-25-04	ID# 6072 CK# 1115	IFA PAC - Iowa 431 E. Locust St. Suite 300 Des Moines, Ia. 50309	PAC	\$ 250.00	
SUB-TOTAL				\$ 2900.00	
TOTAL (if last page of this schedule)				\$	

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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)
 Paul Bell For State Representative

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.

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DATE RECEIVED (MM/DD/YY)	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
09-28-04	ID# CK# 3981	I F B F, PAC 5400 UNIVERSITY Avenue West Des Moines Ia 50266	PAC	\$ 1500.00	
09-25-04	ID# 6077 CK# 1706	Iowa Pharmacy PAC 8515 Douglas, Suite 16 Des Moines, Ia. 50322	PAC	\$ 100.00	
09-27-04	ID# 6064 CK# 1955	Iowa F.O.R.E. Friends of Rural Electrification 8525 Douglas Ave. Suite 48 Des Moines, Ia 50322	PAC	100.00	
10-01-04	ID# 6101 CK# 3060	Motor Carriers P.O. Box 6121 East Des Moines St N Des Moines, Ia. 50309	PAC	\$ 500.00	
10-02-04	ID# 6073 CK# 708	Iowa Medical 1001 Grand Avenue 50265 West Des Moines, Ia 3502	PAC	\$ 100.00	
10-01-04	ID# CK# 593	CITIZENS For Preservation of 1 Prairie Meadows RACING Altoona Ia. 50009	PAC	\$ 500.00	
10-01-04	ID# CK# 2994	Eugene Bogash 4625 NW LOVINGTON Dr. Des Moines, Ia. 50310-2135		\$ 50.00	
10-01-04	ID# CK# 8696	Carroll or Judy Rymbau gh 7053 W. 104th St. N. Mingo, Ia. 50168-8655		\$ 50.00	
10-04-04	ID# 6351 CK# 1044	Petroleum Marketers & Convenience Stores of Iowa 1303 - 50th West Des Moines, Ia. 50266	PAC	\$ 200.00	
10-04-04	ID# 6086 CK# 13194	ISEA 777 3rd St. Des Moines, Ia. 50309	PAC	\$ 150.00	

SUB-TOTAL

\$ 3250.00

TOTAL (if last page of this schedule)

\$

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SCHEDULE A (Rev. 06/97)	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)
Paul Bell For State Representative

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.

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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
10-05-04	ID# CK# 7289	Paul + Mary Friedenborg 2132 Warren St. Darien Port, Ia, 52804	Friend	\$ 25.00	
10-05-04	ID# CK# 2292	Dennis + Nancy Harrott 345 W. 28 th St S. Newton, Ia. 50208	Friend	\$ 25.00	
	ID# CK#				

SUB-TOTAL \$ 50.00

TOTAL (if last page of this schedule) \$ 7,760.00

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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)
Paul Bell For State Representative

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
7-19-04	ID# CK# 878	House Truman Fund Des Moines, Iowa	Donation to the House Truman Fund	\$ 1,000.00
7-19-04	ID# CK# 879	Fareway Grocery 120 N. 3rd Ave. E. Newton, Ia. 50208	Candy For Parade in Baxter	73.68/100
7-27-04	ID# CK#	US Bank 112 W. 2nd St. S. Newton, Ia.	Maintenance Fee For checking Acc.	\$ 5.25
8-15-04	ID# CK# 0880	U.S. Post Office 215 S. 2nd Ave. E. Newton, Ia. 50208	Postage stamps For mailings	\$ 111.00
8-24-04	ID# CK# 881	Christian Photon Des Moines, Ia.	Digital Camera For web site + Pictures For Media Front	\$ 500.00
8-25-04	ID# CK#	U.S. Bank 112 W. 2nd St. S. Newton, Ia.	Maintenance Fee For checking Acc.	\$ 5.25
9-10-04	ID# CK# 882	House Truman Fund Des Moines, Iowa	Donation For the House Truman Fund	\$ 600.00
9-27-04	ID# CK#	U.S. Bank 112 W. 2nd St. S. Newton, Ia. 50208	Maintenance Fee For checking Acc.	\$ 5.25
SUB-TOTAL				\$ 2300.43
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 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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)
Paul Bell For State Representative

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
10-13-04	ID# CK# 883	House Truman Fund Des Moines, Iowa	Donation to the Truman Fund	\$ 2,000.00
10-13-04	ID# CK# 884	Humphrey Club membership Truman Fund Des Moines, Ia.	JEFFERSON & JACKSON EVENT IN Des Moines	\$ 750.00
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 5050.43

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).)

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
PAUL BELL For State Representative

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*
01-01-03 - 12-31-03	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	For computer usage materials & newsletters 1000 & printer 14 hrs.	\$ 140.00
01-01-03 - 12-31-03	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	For meals talks Fundraisers, Campaign committees & meetings 16-meals	\$ 136.72
01-01-03 - 12-31-03	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	Mileage incurred for talks, Paradise meetings, door knocking District 41 miles 1738 x 31	\$ 538.78
01-01-04 - 05-14-04	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	For computer usage newsletters Campaign preparation 7-hrs. 10.00	\$ 70.00
01-01-04 - 05-14-04	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	For meals talks Fundraisers & Campaign committees & meetings 9-meals	\$ 76.92
01-01-04 - 05-14-04	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	Mileage incurred for talks, Paradise meetings, door knocking District 41 582-miles x 31	\$ 180.42
05-15-04 - 07-15-04	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	For Computer usage newsletters, Campaign preparation, mailings 6 hrs - 15.00	\$ 90.00
SUB-TOTAL			\$ 1232.84
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$

*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.

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Paul Bell For State Representative.

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*
05-15-04 -	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	For meals, talks Fundraisers, Campaign Committee's meetings 4 meals 1-meeting with committee	\$ 48.25
05-15-04 -	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	Mileage incurred for talks, Parades, door knocking District 41 437 x 31	\$ 135.47
07-15-04 -	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	For Computer usage Newsletters, Campaign prepared mailings. 8 hrs - 15	\$ 120.00
07-15-04 -	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	For meals, talks, Fundraisers, Campaign Committee's meetings 8- Events - 3-Committee meetings	\$ 112.78
07-15-04 -	Paul Bell 611 E. 17th St. N. Newton, Ia. 50208	Mileage incurred for talks, Parades, door knocking District 41 886 miles x .31	\$ 274.66

SUB-TOTAL \$ ~~691.16~~
 691.16
 TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD \$ 1924.00

*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.

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.

CHECK THIS BOX IF
AMENDING FORM

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

Paul Bell For State Representative

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
08-28-04	CANON Digital Camera	\$500.00	\$500.00

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) \$ 500.00

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

* If estimated, show est. beside figure.

(Attach Additional Schedules if Needed)