

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1393</u>
Logged In	<u>SW</u>
Scanned	
Computer	

COMMITTEE NAME (Must be same as on Statement of Organization)
Berry for Iowa House of Rep.

IMPORTANT: Indicate type of committee you are reporting for: 3

(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

CANDIDATE COMMITTEES ONLY:

Candidate Name: Deborah Political Party: _____

Office Sought: _____ District (if Senate or House): _____

ALTA ELECTORAL DISCLOSURE BOARD
OCT 18 2004
pm 10-15
FILED

Mary W. Sherwith
SIGNATURE OF TREASURER (or person filing this report)

319 232-1025
TELEPHONE

Oct 4, 2004
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 Oct 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.)	\$	<u>2620.25</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>3205.00</u>
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	\$	<u>5825.25</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>2467.31</u>
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)	\$	<u>3357.94</u>

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	_____
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>346.41</u>
**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) \$ _____

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)
Berry for Iowa House of Rep.

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
7/16/04	ID# CK#	Leona Sallis 419 Adams St. Waterloo, IA 50703		\$ 25.00	✓
7/23/04	ID# 6059 CK# 2513	IA committee of Auto. Retailers 1111 Office Park Rd. West Des Moines, IA 50265		150.00	✓
7/25/04	ID# 6060 CK# 2298	Pa. com. on political Ed, AFI-620 2000 Walker, Suite A Des Moines, Ia 50317		200.00	✓
7/27/04	ID# CK#	Mrs John O. Conroy 206 Newell St Waterloo, IA 50703		10.00	✓
8/9/04	ID# 6116 CK# 1268	Political Action - Ia. Dealers P.O. Box 65840 West Des Moines, IA 50265		75.00	✓
8/9/04	ID# CK# 1480	Pfizer PAC - State 235 East 42nd Street New York, NY 10017		150.00	✓
8/19/04	ID#* 6021 CK# 1758	Credit Union PAC 6021 3737 Westtown Parkway W. Des Moines, IA 50266		150.00	✓
8/20/04	ID# CK#	Richard L. Blumeyer 209 W. 5th St. Apt. 530 Waterloo, IA 50701-5429		25.00	✓
8/28/04	ID# CK#	Reggie E. Shari Mc Alhee 512 Ricker St Waterloo, IA 50703		50.00	✓
8/28/04	ID# CK#	Anthony Tisdale 438 Cottage St. Waterloo IA. 50703		30.00	✓
SUB-TOTAL				\$ 865.00	
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.

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONEY 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)
Berry for Iowa House of Representatives

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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
8/28/04	ID# CK#	John Standafer 830 Calcumett Dr. Cedar Falls, IA 50613		\$ 100.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Janice B. Little 231 River Forest Road Evansdale, IA 50707		50.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	James and Ruth Anderson 1503 Newell-Box 1692 Waterloo, IA 50704		50.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Mary & David McCalley 1915 Grand Blvd Cedar Falls, IA 50613		50.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Kelvin R. Everding 617 Campbell Ave Waterloo, IA 50701		50.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	William A. Dotzler 2837 Cedar Terrace Dr. Waterloo, IA 50702		50.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Karen And John Miller 4213 W Shaub's Rd. Cedar Falls, IA 50613		50.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Laura Jane Jesford 3913 Carlton Dr. Cedar Falls, IA 50613		50.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Willie Mae Wight 327 Almond St. Waterloo, IA 50703		30.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Hervie Perreault 3102 Nipiwatha Rd. Cedar Falls, IA 50613		30.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 510.00	
TOTAL (if last page of this schedule)				\$	

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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)
Berry for Iowa 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.

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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
8/28/04	ID# CK#	Dr Laquita Blockson 156 Pershing Rd. Waterloo, IA 50701		\$ 30.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Cheryl M. Faries 112 E. Parker St. Waterloo, IA 50703		30.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Donald S. Carver 1628 Mitchell Ave. Waterloo, IA 50702		30.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Edward J. Gallagher III 801 Sheridan Rd. Waterloo, IA 50701		30.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Shane R. Schellhorn 2120 Parkview Dr. Hilbertville, IA 50634		30.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Michael D. Blackwell P.O. Box 804 Cedar Falls, IA 50613		30.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	David W. Goodson 227 Madison St. Waterloo, IA 50703		30.00	<input checked="" type="checkbox"/>
8/28/04	ID# CK#	Johnnie & Barbara Berry 55 Franklin St. Waterloo, IA	Parents	25.00	<input checked="" type="checkbox"/>
8/31/04	ID# CK#	Robert & Mary Molinaro 3545 Augusta Cir. Waterloo, IA 50701		200.00	<input checked="" type="checkbox"/>
9/1/04	ID# CK#	Walter Reed Jr. 521 E. Dale St. Waterloo, IA		25.00	<input checked="" type="checkbox"/>

SUB-TOTAL \$ 460.

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)
Berkey for Ia. House of Rep.

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
9/2/04	ID# CK#	Roger White 1303 Greenwood Ave Cedar Falls, IA 50613		\$ 25.00	✓
9/2/04	ID# CK#	Danna L. Nelson 501 Sycamore Suite 170 Waterloo, IA 50703		25.00	✓
9/8/04	ID# CK#	Betty A. Deberg 826 Westwood Dr. Cedar Falls, IA 50613		50.00	✓
9/8/04	ID# CK#	Jean M. Trained 1024 7th Av., N.W. Waverly, IA 50677		100.00	✓
9/10/04	ID# CK#	Miriam Brown Tyson 214 Zachary Court Waterloo, Ia 50701		35.00	✓
9/14/04	ID# CK#	Catherine Gallagher 80 Prospect Blvd. Waterloo IA 50701		50.00	✓
9/19/04	ID# CK#	Anna M. Wleems 635 Independence Waterloo, IA 50703		5.00	✓
9/20/04	ID# CK#	Dr. Russell Adams 2124 Minnetonka Cedar Falls, IA 50613		50.00	✓
9/24/04	ID# CK#	WellPAC # 1395 636 Grand Avenue Des Moines, Iowa 50309		250.00	✓
9/27/04	ID# CK#	Thomas J. Ferguson 1150 Columbus Dr. Waterloo, IA 50702		30.00	✓
SUB-TOTAL				\$ 620.00	
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)
Berry for Ia. House of Rep.

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
9/27/04	ID# 8026 CK# 07380	I. B. E. W. Educational Com. 1125 15th Street, N.W Washington, DC 20005		\$ 100.00	✓
10/1/04	ID# 1393 CK# 1948	Iowa P.O.R.E 8525 Douglas Ave. Suite 48 Des Moines IA 50322		100.00	✓
10/1/04	ID# 6062 CK# 195	Ia. Certified Public Accountants 950 Office Park Road Suite 300 West Des Moines Iowa 50265		100.00	✓
10/5/04	ID# 6073 CK# 709	Iowa Medical Political Action 1001 Grand Avenue West Des Moines IA 50265		150.00	✓
10/10/04	ID# CK# 13177	Ia. State Education Assoc. PAC (ISEA - PAC) 777 3rd Street Des Moines, IA 50309		150.00	✓
10/10/04	ID# CK#	Robert J. Greenwood 3553 Murrefield Drive Waterloo, IA 50201-4661		50.00	✓
10/10/04	ID# 6077 CK# 1707	Iowa Pharmacy PAC #6077 8515 Douglas, Suite 16 Des Moines, IA 50322		100.00	✓
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$ 750.00

TOTAL (if last page of this schedule)

3,205.00

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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)

Berry for Ia. House of Rep.

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
7/30/04	ID# CK#	<i>Marrist Long Wolf 296 State St. Boston, MA 02109</i>	<i>attended National Democrat convention (Lodging expenses)</i>	\$ 1,231.30
8/15/04	ID# CK#	<i>Postmaster 300 Sycamore St Waterloo, Ia 50703</i>	<i>Stamps</i>	8.00
8/20/04	ID# CK#	<i>Dickens Printing 310 E 4th St. Waterloo, IA 50703</i>	<i>Invites</i>	12.84
8/20/04	ID# CK#	<i>Print 200 308 E 7th St. Waterloo, IA 50701</i>	<i>Parade Cards</i>	64.20
8/20/04	ID# CK#	<i>Russell Lowe 130 Webster St. Waterloo, Ia 50703</i>	<i>Reimbursed for mailing</i>	55.50
8/30/04	ID# CK#	<i>Waterloo Center / Arts 225 Commercial St. Waterloo, IA 50701</i>	<i>Room Rental \$165.00 microphone 25.00 Beer 75.00 Fund raiser for Berry</i>	265.00
8/30/04	ID# CK#	<i>C. Joy Lowe 130 Webster St. Waterloo, Ia 50703</i>	<i>Food for Fund Raiser (reimbursed)</i>	179.88
8/30/04	ID# CK#	<i>Mary D. Sheroff 124 S Beech St Waterloo, Ia 50703</i>	<i>Reimbursed for paying Bartender</i>	18.00
SUB-TOTAL				\$ 1,834.72
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)
Berry for Iowa House of Rep.

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>8/30/04</i>	ID# CK#	<i>Deborah Berry 241 Madison St Waterloo, Ia 50703</i>	<i>reimbursed for buying decorations & table cloths for fund raiser</i>	<i>\$ 32.59</i>
<i>9/11/04</i>	ID# CK#	<i>Iowa Democratic Party 1408 Locust Des Moines IA</i>	<i>Truman Fund Donation</i>	<i>500.00</i>
<i>9/11/04</i>	ID# CK#	<i>Iowa Democratic Party 1408 Locust Des Moines IA</i>	<i>Game Package Donation</i>	<i>100.00</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 632.59</i>
TOTAL (if last page of this schedule)				<i>\$ 2467.31</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 56.6(3)(i).)

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Berry for Iowa House of Rep.

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
8/28/04	Russell Lowe 130 Webster St. Waterloo, IA 50703		Bought Pepsi for Fundraiser	\$ 19.65	✓
8/28/04	Joy Lowe 130 Webster St. Waterloo, IA 50703		Bought and donated dip, ham, melon & cantelope	26.76	✓
8/28/04	Chuck Means P.O. Box 2456 Waterloo, IA 50704		Provide musical band for fundraiser	300.00	✓

SUB-TOTAL \$ 346.41
 TOTAL (if last page of this schedule) \$ 346.41

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