

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1543
Logged In	SW
Scanned	
Computer	

COMMITTEE NAME (Must be same as on Statement of Organization)
Heck for State Representative

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

CANDIDATE COMMITTEES ONLY:

Candidate Name: Steven A. Heck Political Party: Democrat
 Office Sought: House of Representatives District (if Senate or House): House 76

FILED
 OCT 19 2004
 pm 10-18

[Signature] (641) 236 7544 10/15/04
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE 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

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.) \$ 1584.77

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) 1197.25

Schedule F: Loans Received total (Attach Schedule F) 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 2782.02

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 2143.71

Schedule F: Loan Repayments total (Attach Schedule F) 0

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) \$ 638.31

****UNPAID BILLS** (From Schedule D - Attach Schedule D) \$ 2295.08

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$ 251.88

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) \$ 0

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

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

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

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Heck 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
7/20/04	ID# CK# 4695	Myron & Betty Bruns 306 Hwy 85 Deep River, Ia		\$1475	<input type="checkbox"/>
8/6/04	ID# CK# 1849	Walter Smith 1118 S. 5th Ave W Newton, Ia 50202		50-	<input type="checkbox"/>
8/2/04	ID# CK# 0750	Ellie Zimmerman 300 Main Street Deep River		15-	<input type="checkbox"/>
8/5/04	ID# CK# 2608	Iowa Democratic Party - Truman Fund/Act. 15101 Fleur Drive Des Moines, Ia 50321		130.50	<input type="checkbox"/>
8/8/04	ID# CK# 7305	Ronald or Judy Kielkopf 11753 W Highway 949 Fremont, Ia 52501		100-	<input type="checkbox"/>
8/13/04	ID# CK# cash	Evelyn Provin 311 Blaine Street Gyrensburg, IA 52221		5-	<input type="checkbox"/>
8/17/04	ID# CK# 4805	Don Smith 1420 Summer St. Grinnell, IA 50112		50-	<input type="checkbox"/>
8/20/04	ID# CK# 0591	Ricky Gerard 3903 G St. Box 66 Amana, Ia 52203		50-	<input checked="" type="checkbox"/>
8/20/04	ID# CK# 7547	David Hausink veld 4209 H St. Amana, Ia 52203		50-	<input checked="" type="checkbox"/>
8/20/04	ID# CK# 3160	Winifred Newcomb PO Box 898 Williamsburg, IA 52361		40-	<input checked="" type="checkbox"/>

SUB-TOTAL \$505.05
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

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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)
Check for State Representative

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8/20/04	ID# CK# 816	Solveig W. Moore 100 Village View Circle Apt 309 Williamsburg, Ia 52361		\$ 60-	<input checked="" type="checkbox"/>
8/20/04	ID# CK# 6468	Bill Berry PO Box 378 Williamsburg, Ia 52361		60-	<input checked="" type="checkbox"/>
8/20/04	ID# CK# 5548	Stephen Hanson 200 West Maple Williamsburg, Ia 52361		31-	<input checked="" type="checkbox"/>
8/20/04	ID# CK# 9021	Robert Wilmann 401 Chatham St. Williamsburg, Ia 52361		25-	<input checked="" type="checkbox"/>
9/7/04	ID# CK# 1184	Joe Cooney 1313 Michael Ave Grinnell, Ia 52112		20-	<input checked="" type="checkbox"/>
9/25/04	ID# CK# 1203	Judith Campbell 14982 Hwy 144 W Hedrick, Ia 52563		100-	<input checked="" type="checkbox"/>
9/25/04	ID# CK# 4376	Roger Doak Box 93 Hedrick, Ia 52563		25-	<input checked="" type="checkbox"/>
9/26/04	ID# CK# 5054	James Ferrell 33351 130th Ave Hedrick, Ia 52563		30-	<input checked="" type="checkbox"/>
9/28/04	ID# CK# 1840	Marvin Read 1124 220th St. Victor, Ia 52347-8518		25-	<input checked="" type="checkbox"/>
10/4/04	ID# 6028 CC106086 CK# 13215 PAC 15813	ISEA-PAC 777 300 St. Des Moines, Ia 50309		250-	<input type="checkbox"/>

SUB-TOTAL

\$ 626-

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)
Heck 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
<i>8/20/04</i>	ID# CK# <i>cash</i>	<i>Unitemized Contributions Cash taken @ fundraiser from approximately 8 people</i>		<i>\$ 66⁻</i>	<input checked="" 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"/>
	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"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL
\$ *66*
TOTAL (if last page of this schedule)
\$ *1197.²⁵*

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	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)
Heck 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# 1014	US PostMaster Malcom IA 50157	stamps	\$185.00
8-10-04	ID# CK# 1015	MPL PO BOX 208 Marengo IA 52201	ads for fundraiser	62.10
8-18-04	ID# CK# 1016	Charlene Heck 706 clay Malcom (wife of candidate)	reimburse for VAN	250.00
8-18-04	ID# CK# 1017	US PostMaster MALCOM IA 50157	stamps for fundraiser	74.00
8-16-04	ID# CK# 1018	HyVee Hwy 146 S Grinnell IA 50112	food for fundraiser	11.31
8-20-04	ID# CK# 1014	Dinner Bell Gate 501 Court St Williamsburg IA	meat & cheese trays for fundraiser	45.00
9-11-04	ID# CK# 1020	US PostMaster Malcom IA 50157	stamps	11.10
9-24-04	ID# CK# 1021	Carter Printing 1734 E Grand Des Moines IA 50316	street signs	1,400.00
SUB-TOTAL				\$ 2035.51
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 68A.402(3)(i).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE **B**
(Rev. 07/03) MONETARY EXPENDITURES

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.

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Heck 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
<i>10-8-04</i>	<i>ID# CK#1022</i>	<i>Steve Heck candidate</i>	<i>reimburse remaining for street signs</i>	<i>\$ 165.20</i>
	ID# CK#			

SUB-TOTAL *\$105.20*

TOTAL (if last page of this schedule) *\$2143.71*

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 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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)
Heck 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.

Reset 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*
3-13-04 7-19-04	Steve Heck Malcom Ia	as previously reported phone calls mileage supplies	\$ 995.24
7-19-04 10-18-04	Steve Heck Malcom Ia	mileage 4,093 x .31 =	1,268.83
7-14-04 10-19-04	Steve Heck Malcom Ia	phone calls	31.01

SUB-TOTAL \$

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD \$ *2,295.08*

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

Page 1 of 1
(for Schedule D)

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.

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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)
Heck for State Representative

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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
8/20/04	candidate	candidate	Vietnam items	\$ 15.00	<input checked="" type="checkbox"/>
8/20/04	Rita Fereau Malcolm Fa 50157		sign & flag	24.50	<input checked="" type="checkbox"/>
8/20/04	Staine Young 2135 1st Avenue W CR IA 52402		John Kerry's Book	26.00	<input checked="" type="checkbox"/>
8/20/04	Vera Heck 4356 235th St Guttenberg IA 52201	Mother	2 candle holders	25.00	<input checked="" type="checkbox"/>
8/20/04	Louis & Betty Berry 10 Box 328 Williamsburg IA 52361		homemade jam & Hawk eye hot	23.00	<input checked="" type="checkbox"/>
8/20/04	Sonya Elzy 115 Circle Dr Williamsburg IA 52361	daughter	Crystal Brochet	25.00	<input checked="" type="checkbox"/>
8/20/04	Steve Hanson 200 West Maple Williamsburg IA 52361		1 hour of music	50.00	<input checked="" type="checkbox"/>
9/25	Bob & Judy Kuhlerts 1175 S Hwy 149 Freeland IA 52561	signature newspapers	ads in paper paid by them	42.48	<input checked="" type="checkbox"/>
10/14	Carol Hedshinckel 4209 H St Amara IA 52201		ad	18.00	<input checked="" type="checkbox"/>
10/14	candidate		Stamps	2.90	<input type="checkbox"/>

SUB-TOTAL \$

TOTAL (if last page of this schedule) \$ **257.88**

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.