

DISCLOSURE SUMMARY PAGE

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

IMPORTANT: Indicate type of committee you are reporting for: 1

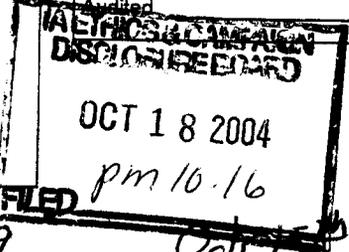
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 (8) Support Slate of Candidates

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>968</u>
Logged In	<u>SW</u>
Scanned	
Computer	

CANDIDATE COMMITTEES ONLY:

Candidate Name Henry V. Rayhons Political Party Republican

Office Sought State Representative District (if ~~Senate~~ or House) H.D. 11



Henry V. Rayhons
 SIGNATURE OF TREASURER (or person filing this report)

641-923-2979
 TELEPHONE

Oct 15 04
 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. 19th, 04 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>236.39</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>5350.00</u>
Schedule F: Loans Received total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>5586.39</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>4577.75</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>1008.64</u>

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

*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) \$ _____

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)
Rayhons for 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
2/22/04	ID# CK# 3247	David Kingland 145 East O ST. Forest City, Ia. 50436		\$ 100 ⁰⁰	
2/22/04	ID# CK# 0539	Ron Lichtborn 826 Hwy 69 N Forest City, Ia. 50436		\$ 100 ⁰⁰	
7/22/04	ID# CK# 9731	Jack R. Smith P.O. Box 68 Scarville, Ia. 50473		150 ⁰⁰	
7/30/04	ID# CK# 1034	Winn. Rep. Women Forest City, Ia. 50436		50 ⁰⁰	
7/30/04	ID# 6116 CK# 1209	Iowa Dealers P.O. Box 65840 West Des Moines, Ia. 50265		125 ⁰⁰	
7/30/04	ID# CK# 3944	LaVerne W. Schroeder 3208 S.W. 34th St. Des Moines, Ia. 50321		25 ⁰⁰	
7/30/04	ID# 6059 CK# 2536	ICAR 1111 Office PK Rd West Des Moines, Ia. 50205		150 ⁰⁰	
8/16/04	ID# CK# 1236	Bill John P.O. Box 246 Clear Lake, Ia. 50428		200 ⁰⁰	
8/16/04	ID# 6004 CK# 4187	assoc. Gen. Contractors 701 E. Court Ave. Des Moines, Ia. 50309		500 ⁰⁰	
8/20/04	ID# CK#	David Steffens, Jr. 602 S. Western St. Lake Mills, Ia. 50450		200 ⁰⁰	
SUB-TOTAL				\$1600 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

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)

Rayhons For Representative

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8/25/04	ID# 6155 CK# 004180	Taxpayers United 2610 Park Ave. Muscatine Ia. 52761		\$ 200 ⁰⁰	
9/1/04	ID# CK#	Du Pont Co 400 Locast St. Suite 700 Des Moines, Ia. 50309		100 ⁰⁰	
9/1/04	ID# 6069 CK#	11 PAC Iowa Ind. 904 Walnut Suite 100 Des Moines, Ia. 50309		200 ⁰⁰	
9/14/04	ID# 6062 CK#	Iowa CPA's 950 Office PK Rd. Suite 300 West Des Moines, Ia 50265		100 ⁰⁰	
9/14/04	ID# 6067 CK#	Iowa Health PAC 6750 Westown Parkway # 100 West Des Moines, Ia. 50266		100 ⁰⁰	
9/15/04	ID# CK#	Rusty Schmidt 1350 Allen Ave. Garner Ia. 50438		50 ⁰⁰	
9/15/04	ID# CK#	Roger Schmidt 44 Golf View Ct Garner, Ia. 50438		100 ⁰⁰	
10/1/04	ID# CK#	Monsanto Citizen ship fund % Dave Tierney, 3302 S.E. Convenience Blvd. Ankeny, Ia. 50021		300 ⁰⁰	
10/1/04	ID# CK#	William R. Johnson Box 267 Belmond, Ia. 50421		100 ⁰⁰	
10/1/04	ID# CK#	Don Furman 856 11 st Place Garner, Ia. 50438		100 ⁰⁰	
SUB-TOTAL				\$ 1350 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)
Rayhons for Representative

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10/1/04	ID# 6234 CK#	Iowa F.B. 5400 University Ave. West Des Moines, Ia. 50266		\$ 100 ⁰⁰	
10/2/04	ID# 6064 CK#	Iowa F.O.R.E. 8525 Douglas Ave. suite 48 Des Moines, Ia. 50322		100 ⁰⁰	
10/4/04	ID# 6101 CK#	Motor Carriers P.O. Box 6121 East Des Moines Des Moines, Ia. 50309		200 ⁰⁰	
10/4/04	ID# 6237 CK# 1674	aBATE 3118 Eastern ave. N.E. Cedar Rapids, Ia. 52402		250 ⁰⁰	
10/4/04	ID# 6073 CK# 749	Iowa Medical PAC 1001 Grand Ave. West Des Moines Ia. 50265		100 ⁰⁰	
10/13/04	ID# 6052 CK#	Ind. Ins. of Iowa 4000 Westown PKY Ste. 700 West Des Moines Ia. 50265		200 ⁰⁰	
10/13/04	ID# CK#	Winneshago Republicans Forest City, Ia. 50436		300 ⁰⁰	
10/13/04	ID# 6058 CK#	Iowa chiro. Soc. 1605 N. ankeny Blvd suite 100 ankeny Ia. 50021		100 ⁰⁰	
10/13/04	ID# 6291 CK#	Iowa Hospital Assoc. 100 E. Grand Suite 100 Des Moines, Ia. 50309		250 ⁰⁰	
10/14/04	ID# 6125 CK# 002385	Iowa Realtors PAC 1370 NW 114 St. Suite 100 Clive, Ia. 50325		500 ⁰⁰	
SUB-TOTAL				2100 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)

Rayhons For Representative

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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
<i>10/14/04</i>	ID# CK# <i>1036</i>	<i>Hancock Co. Rep. Party 2480 Palm Ave. Garner, Ia. 50438</i>		<i>\$ 300⁰⁰</i>	
	ID# CK#				

SUB-TOTAL

\$ 300⁰⁰

TOTAL (if last page of this schedule)

\$ 5350⁰⁰

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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)
Rayhons for 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
7/20/04	ID# CK# 2526	Hancock Rep. Party % Brian Jones Britt, Ia. 50423	Fund Raiser	\$ 30 ⁰⁰
8/1/04	ID# 2527 CK# 2527	Rake Firemen Rake Ia.	adv. Fund Raiser	12 ⁰⁰
8/2/04	ID# CK# 2528	Britt Lutheran Church Britt, Ia. 50423	adv. Fund Raiser	10 ⁰⁰
8/19/04	ID# CK# 2529	Britt Athletics Britt, Ia. 50423	adv. Fund Raiser	11 ⁵⁰
8/14/04	ID# CK# 2530	Mc Cubbin Trophies Forest City, Ia. 50436	adv. Fund Raiser Tractor Pull	50 ⁰⁰
8/20/04	ID# CK# 2531	Marvalyn Rayhons 2820 Oak Ave. Garner, Ia. 50438	Loan Repay Schedule F.	\$ 500 ⁰⁰
8/21/04	ID# CK# 2532	First Lutheran Church B.C., Iowa	adv. Fund Raiser	15 ⁰⁰
8/25/04	ID# CK# 2533	U S Post Office Garner, Ia. 50438	Stamps	37 ⁰⁰
SUB-TOTAL				\$ 665 ⁵⁰
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).)

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)
Rayhons for 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
8/28/04	ID# CK# 2534	Bethlehem Church Buffalo Center, Ia.	Adv. Fund Raiser	\$ 12 ⁰⁰
8/29/04	ID# CK# 2535	K D Youth Group Duncan, Ia. 50438	Adv. Fund Raiser	10 ⁰⁰
9/8/04	ID# CK# 2536	Worth Co. F.B. Northwood, Ia.	Adv. Spokesman	40 ⁰⁰
9/9/04	ID# CK# 2537	Christian Coalition Des Moines, Ia.	Fund Raiser Adv.	90 ⁰⁰
9/14/04	ID# CK# 2538	H. V. Rayhons 2820 Oak Ave. Garner, Ia. 50438	Repay for Fair Adv.	326 ³⁶
10/4/04	ID# CK# 2539	Iowa Republican Party Ragen Dinner Fund Des Moines, Ia.	Fund Raiser	1000 ⁰⁰
10/4/04	ID# CK# 2540	U S Post Office Forest City, Ia. 50436	Stamps	3 ²⁰
10/12/04	ID# CK# 2541	Winnebago Republican Party Forest City, Ia. 50436	Fund Raiser Adv.	100 ⁰⁰

SUB-TOTAL \$ 1582.06

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

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)
Rayhons for 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# 2542	Worth Co. Rep. Northwood, Ia.	Adv.	\$ 100 ⁰⁰
10/13/04	ID# CK# 2543	Garner, Leaker Garner, Ia. 50138	Adv.	82 ⁵⁰
10/13/04	ID# CK# 2544	B.C. Tribune B.C., Iowa	Adv.	62.30
10/14/04	ID# CK# 2545	F.C. Summit Forest City, Ia. 50136	Adv.	88 ⁵⁰
10/14/04	ID# CK# 2546	U S Post Office Beland, Ia	Stamps	37 ⁰⁰
10/14/04	ID# CK# 2547	Lake Mill Graphic Lake Mills, Ia.	Adv.	82 ⁰⁰
10/14/04	ID# CK# 2548	Northwood Anchor Northwood, Ia.	Adv.	90 ⁵⁰
10/14/04	ID# CK# 2549	U S Post Office Manly, Ia.	Stamps	37 ⁰⁰

SUB-TOTAL \$ 579.80

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)
Rayhons for 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>10/14/04</i>	ID# CK# <i>2550</i>	<i>Hancock Co. Republican Party Garner, Ia. 50438</i>	<i>Adv.</i>	<i>\$ 100⁰⁰</i>
<i>10/14/04</i>	ID# CK# <i>2551</i>	<i>Marvalyn Rayhons 2820 Oak Ave. Garner, Ia. 50438</i>	<i>mileage</i>	<i>1650³⁹</i>
	ID# CK#			

SUB-TOTAL \$ *1750.39*

TOTAL (if last page of this schedule) \$ *4577.75*

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)
Rayhons for Representative

SCHEDULE F (Rev. 07/03)	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 \$ 500⁰⁰

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
8/20/04	Marylyn Rayhons 2820 Oak Ave Garner, Ja. 50438	wife	\$ 500 ⁰⁰

TOTAL (PART I) \$ _____

TOTAL CASH REPAYMENTS (PART II) \$ 500⁰⁰

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0

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