

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

Reset Form

FORM

DR-2

DISCLOSURE

(Rev. 07/2004)

REPORT

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

SEYMOUR for SENATE

IAEHS & CAMPAIGN DISCLOSURE BOARD  
OCT 15 2004  
FILED

For Office Use Only

Comm. # 1411  
Logged In SW e  
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Computer  
Audited

IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name JAMES A. SEYMOUR Political Party (if applicable) REPUBLICAN  
Office Sought IOWA SENATE District (if Senate or House) 28

Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF PERSON FILING REPORT James A. Seymour TELEPHONE (712) 647-2699

DATE SIGNED October 15, 2004

I AM FILING A October 19, 2004 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
(report date) Indicate by #  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 DR-3 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. (Total of all funds 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.) ..... \$ 9722.28

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 12430.00

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 ..... \$ 22152.28

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... 7206.82

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) ..... \$ 14,945.46

\*\*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

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)  
**SEYMOUR FOR SENATE**

**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
7/19/04	ID# 9659 CK# 1212	FEDERATION OF IOWA INSURERS 317 SIXTH AVE DES MOINES, IOWA 50309		\$ 500.00	<input type="checkbox"/>
7/27/04	ID# 8242 CK# 10990	GLAXO Smith Kline FIVE MOORE DR. RESEARCH TRIANGLE PARK, NC 27709		250.00	<input type="checkbox"/>
7/30/04	ID# CK# 3931	LAVENNE W. SCHROEDER 3208 SW 34TH ST. DES MOINES, IOWA 50321		25.00	<input type="checkbox"/>
7/30/04	ID# CK#	KAROL + ROSEANNE KING 1568 - 170TH TRJ MONDAMIN, IOWA 51557		100.00	<input type="checkbox"/>
7/30/04	ID# 6116 CK# 1197	IOWA-NEB Equip. DEALERS ASSOC 1311 50TH ST. WEST DES MOINES, IOWA 50265		150.00	<input type="checkbox"/>
8/10/04	ID# CK# 1490	PFIZER INC PAC IOWA AGENT, LORELEI HEISINGER 411 FOUR SEASONS DR. WATERLOO IA 50701		200.00	<input type="checkbox"/>
8/13/04	ID# 6004 CK#	ASSOC. GENERAL CONTRACTORS of IOWA, 701 E. COURT AVE. P.O. BOX 757 DES MOINES IA. 50303		1500.00	<input type="checkbox"/>
8/13/04	ID# 6021 CK# 1740	CREDIT UNION PAC PO BOX 10409 DES MOINES, IOWA 50306		500.00	<input type="checkbox"/>
8/13/04	ID# 6098 CK#	IOWA BEVERAGE PAC		250.00	<input type="checkbox"/>
8/13/04	ID# CK#	JAY T. DOLL VP. DOLL DISTRIBUTING 3501-23rd Ave. COUNCIL Bluff, Iowa		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 3675	
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). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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)  
**SEYMOUR FOR SENATE**

**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
8-23-04	ID# 6155 CK# 4185	TAXPAYERS UNITED 2610 PINE AVENUE MUSCATINE, IOWA 52761		\$ 200.00	<input type="checkbox"/>
9-1-04	ID# CK# 1246	WELL PAC 636 GRAND AVE STE 13 DES MOINES, IOWA 50309		500.00	<input type="checkbox"/>
9-1-04	ID# CK#	Smithfield Foods PAC 499 PARK AVE STE 600 New York, N.Y. 10022		275.00	<input type="checkbox"/>
9-1-04	ID# 6069 CK# 2198	IOWA INDUSTRY PAC 904 WALNUT ST STE 100 DES MOINES, IOWA 50309		200.00	<input type="checkbox"/>
9-8-04	ID# CK#	HARRISON CO. REPUBLICAN WOMEN - 1568 - 1703 TR. MONMOUTH, IOWA 51557		700.00	<input type="checkbox"/>
9-17-04	ID# CK# 1348	MCI IOWA PAC 707 - 17th ST STE 4200 DENVER, CO, 80202		100.00	<input type="checkbox"/>
9-17-04	ID# 6291 CK#	IOWA HOSPITAL ASSOC PAC 100 E GRAND STE 100 DES MOINES, IOWA 50309		5,000.00	<input type="checkbox"/>
9-17-04	ID# CK#	Charles + Barbara Miller 1547 Ripley LN. WOODGINE, IOWA 51579		30.00	<input type="checkbox"/>
9-22-04	ID# 6234 CK# 3953	IOWA FARM BUREAU FEDERATION 5400 UNIVERSITY AVE W. DES MOINES, IOWA 50266		100.00	<input type="checkbox"/>
9-29-04	ID# CK#	Ed B. FRIEDMANN JR. PA PO BOX C Redfield, IOWA 50233		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 7305	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE	
<b>A</b>	MONETARY RECEIPTS
(Rev. 07/03)	
<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)  
*DEVELOPER FOR SENATE*

**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
9-29-04	ID# CK#	CYRIG H. NEILSEN 8621 TITTE ST Circle LAS VEGAS, NEVADA 89117		\$ 150.00	<input type="checkbox"/>
9-29-04	ID# 6064 CK# 1833	IOWA FORE HARRISON CO. REC 61-65 Fourth ST. WOODBINE, IA 51579		100.00	<input type="checkbox"/>
9-29-04	ID# 6478 CK# 1128	IOWA PAC 400 HOMESTEAD Bldg. 300 Locust ST. DEWAINES, IA 50309		100.00	<input type="checkbox"/>
10-5-04	ID# 6237 CK# 1647	ABATE PAC 3118 ENSIEVALE AVE N.E CEDAR RAPIDS, Iowa 52402		100.00	<input type="checkbox"/>
10-5-04	ID# 6073 CK# 786	Iowa Medical PAC 1901 GRAND AVE W. DEWAINES, IOWA 50265		250.00	<input type="checkbox"/>
10-5-04	ID# CK# 2184	Woodbury County Republicans CENTRAL COMMITTEE Sioux City, Iowa 51101		200.00	<input type="checkbox"/>
10-13-04	ID# 6058 CK# 2538	IOWA CHIROPRACTIC SOCIETY 1605 N. HAWKEY BLVD HAWKEY, IOWA 50021		200.00	<input type="checkbox"/>
10-13-04	ID# 6378 CK# 1198	I-VET PAC 5921 FERRY DR DEWAINES, IOWA 50321		100.00	<input type="checkbox"/>
10-14-04	ID# 6082 CK# 989	MID AMERICAN ENERGY CO 666 GRAND AVE DEWAINES, IOWA 50303		250.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1450

TOTAL (if last page of this schedule)

\$ 12,430

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Reset Form

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE B</b> (Rev. 07/03)	<b>MONETARY EXPENDITURES</b>
<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)

*SEYMOUR FOR SENATE*

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
8-2-04	ID# CK# 1068	Verizon Wireless	Cellular Phone Monthly Statement	\$ 40.23
8-18-04	ID# CK# 1069	JIM SEYMOUR 901 WHITE ST. WOODBINE, IOWA 51579	REIMBURSEMENT OUT OF POCKET CAMPAIGN EXPENSES	435. <sup>00</sup>
8-31-04	ID# CK# 1070	Verizon Wireless	Cellular Phone Monthly Statement	40.24
9-9-04	ID# CK# 1071	Legislative Majority Fund 621 E. 9th St DES MOINES, IOWA 50309	Republican Party of Iowa	5000. <sup>00</sup>
9-7-04	ID# CK# 1072	Christian Coalitions of Iowa	CONSTITUANTS EVENT Friends & Family Awards DES MOINES IOWA	45. <sup>00</sup>
9-17-04	ID# CK# 1073	JIM SEYMOUR 901 WHITE ST. WOODBINE, IOWA 51579	REIMBURSEMENT OUT OF POCKET CAMPAIGN EXPENSE	348.36
9-25-04	ID# CK# 1074	Woodbury County Central Committee Sioux City, Iowa	Fundraising Event	100. <sup>00</sup>
9-29-04	ID# CK# 1075	Verizon Wireless	Cellular Phone	58.79
SUB-TOTAL				\$ 6067.62
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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Reset Form

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
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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)  
*SEYMOUR for SENATE*

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# 1076	DUNDAP REPORTER 114 IOWA AVE DUNDAP, IOWA 51529	Harrison County Newspaper Paid Ad	\$ 35.20
10/13/04	ID# CK# 1077	Logan Herald OBSERVER 519 WALKER ST. WOODBINE, IOWA 51579	Harrison County Newspaper Paid Ad	52.00
10/13/04	ID# CK# 1078	DENISON BULLETIN 1410 Broadway DENISON, IOWA 51442	Crawford County RENEW Subscription	52.00
10/15/04	ID# CK# 1079	LEGISLATIVE MAJORITY FUND 621 E. 9th ST DES MOINES, IOWA 50309	Republican Party of Iowa	1000.00
	ID# CK#			

SUB-TOTAL \$1,139.20  
TOTAL (if last page of this schedule) \$7,206.80

**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).)