

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 DISCLOSURE REPORT (Rev. 05/2002) For Office Use Only Comm. # Indexed SW 4992 Audited Computer

COMMITTEE NAME (Must be same as on Statement of Organization) KETTERING CAMPAIGN 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 State of Candidates

CANDIDATE COMMITTEES ONLY: Candidate Name STEVE KETTERING Office Sought SENATOR Political Party REPUBLICAN District (if Senate or House) 26 NOV 2, 2004 pm 10-27 FILED

SIGNATURE OF TREASURER (or person filing this report) [Signature]

712-657-3347 TELEPHONE

October 27, 2004 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 activity of 10-15-04 thru 10-26-04 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

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$17,737.20), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 1,950.00, Schedule F: .00, Schedule H: .00), SUB-TOTAL (\$19,687.20), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: 10,037.00, Schedule F: .00), CASH ON HAND at the end of this reporting period (\$9,650.20).

Table with columns for description and amount. Rows include: UNPAID BILLS (\$0.00), IN KIND CONTRIBUTIONS (\$0.00), OUTSTANDING LOANS (\$0.00).

CANDIDATE COMMITTEES ONLY: CONSULTANT BREAKDOWN (Schedule G Attached?) [] YES [X] NO VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$

For Instructions, See Back of Form

Reset Form

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)
KETTERING CAMPAIGN

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
10/20/04	ID# 6125 CK# 2436	Iowa Realtors PAC 1370 NW 114th St., Suite 100 Clive, IA 50325		\$ 500.00	<input type="checkbox"/>
10/22/04	ID# 8338 CK# 5126	Fareway Stores "FAS PAC" 2600 E. 8th Street Boone, IA 50036		100.00	<input type="checkbox"/>
10/22/04	ID# 6282 CK# 1481	Hy-Vee Inc. Employees PAC 5820 Westown Parkway West Des Moines, IA 50266-8223		100.00	<input type="checkbox"/>
10/23/04	ID# 9512 CK# 318	Carroll County Republican Women %Laurie Watje 24474 - 215th Street Carroll, IA 51401		250.00	<input type="checkbox"/>
10-25-04	ID# 6160 CK# 2133	Iowa Independent Bankers PAC 6160 1603 - 22nd Street, Suite 202 West Des Moines, IA 50266		1000.00	<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					
TOTAL (if last page of this schedule)					

\$ 1950.00

* 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.

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Reset Form

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING 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.

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

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
10/18/04	ID# 699 CK# 1033	Lytton Town Crier PO Box Lytton, IA 50561	Newspaper Advertise	\$ 37.00
10/26/04	ID# 699 CK# 1034	Legislative Majority Fund 621 East 9th Des Moines, IA 50309	Contribution	10,000.00
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 10,037.00

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).)