

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1573
Logged In	<i>[initials]</i>
Scanned	
Computer	
Audited	

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

IMPORTANT: Indicate type of committee you are reporting for:

(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 *Karen Butler* Political Party *Republican*
 Office Sought *Iowa House Representative* District (if Senate or House) *7*

**IA ETHICS & CAMPAIGN
DISCLOSURE BOARD**
fax
 JUN - 4 2004
FILED 4 June 04
 DATE SIGNED

Karen J. Appel
 SIGNATURE OF TREASURER (of person filing this report)

712-362-4450
 TELEPHONE

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A _____ 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.)	\$	<u>- 0 -</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1350.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>- 0 -</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>- 0 -</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>1350.00</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....		<u>273.89</u>
Schedule F: Loan Repayments total (Attach Schedule F).....		<u>- 0 -</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>1076.11</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$	<u>381.89</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>- 0 -</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$	<u>- 0 -</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>- 0 -</u>

For Instructions, See Back of Form



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)
Karen Butler 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
4/3/04	ID# CK#	Warren A. Koehler PO Box 1622 Maple Grove MN 55311	Brother In-Law	\$250.00	<input checked="" type="checkbox"/>
5/7/04	ID# CK#	James A. Butler 2003 Dan Bur Drive Estherville IA 51334	Husband	100.00	<input checked="" type="checkbox"/>
5/12/04	ID# CK#	James Boyer 2428 470th Ave Ringsted IA 50578	N/A	250.00	<input checked="" type="checkbox"/>
5/12/04	ID# CK#	Vernon Origer 4126 180th St. Estherville IA 51334	N/A	100.00	<input checked="" type="checkbox"/>
5/12/04	ID# CK#	Tanice Greig 103 N. 8th St. Estherville IA 51334	N/A	100.00	<input checked="" type="checkbox"/>
5/12/04	ID# CK#	Lyle Klinger 15 Orchard Lane Estherville IA 51334	Father	100.00	<input checked="" type="checkbox"/>
5/17/04	ID# CK#	Rence Kersey PO Box 30021 Johnston IA 50131	N/A	50.00	<input checked="" type="checkbox"/>
5/17/04	ID# CK#	Sheri Lair RR2 Box 265 A Estherville IA 51334	N/A	100.00	<input checked="" type="checkbox"/>
5/17/04	ID# CK#	Alan Robinson 13 Alexander Rd Estherville IA 51334	N/A	10.00	<input checked="" type="checkbox"/>
5/17/04	ID# CK#	Hoyer Chiropractic 9 North 6th St Estherville IA 51334	N/A	200.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$1260.00	
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). 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



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)
Karen Butler 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
5/19/04	ID# CK#	Becky Denny 209 N. 14th Estherville IA 51334	N/A	\$ 20.00	<input checked="" type="checkbox"/>
5/19/04	ID# CK#	Joan Bergman 20 Westwood Drive Estherville IA 51334	N/A	20.00	<input checked="" type="checkbox"/>
5/29/04	ID# CK#	Mary Jane Johnson 16945 256th Ave Spirit Lake IA 51360	N/A	100.00	<input checked="" type="checkbox"/>
5/29/04	ID# CK#	Audrey Griffith 4846 120th St Dolliver IA 50531	N/A	50.00	<input checked="" type="checkbox"/>
5/29/04	ID# CK#	Deb & Steve Satern 320 W 5th Ave N Estherville IA 51334	N/A	100.00	<input checked="" type="checkbox"/>
	ID# CK#	Hoyer Chiropractic 9 North 6 St Estherville IA 51334	Refund of donation	200.00	<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

\$ 90.00

TOTAL (if last page of this schedule)

\$ 1350.42

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Reset Form

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)
Karen Butler 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
5/7/04	ID# CK#	Bank Plus	Direct withdrawal check printing	\$9.58
5/14/04	ID# 1573 CK# 1001	Karen Butler 2003 Dan Bur Drive Estherville IA 51334	Envelopes from Dollar General for reference mailing	25.44
10/1/04	ID# CK# 1002	Slingerland office Services 803 3rd Ave N. Estherville IA 51334	Campaign letters (1420)	147.82
6/1/04	ID# CK#	" "	Refund of over payment of a bank bill	(19.95)
6/1/04	ID# CK# 1003	Estherville Postmaster	Postage for mailing	111.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$273.89
TOTAL (if last page of this schedule)				\$273.89

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).)

