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FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1553
Logged In	
Scanned	
Computer	WRS
Audited	7-30-04

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

Committee to Elect Nathan Reichert

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: Nathan Reichert Political Party: Democrat
 Office Sought: Representative District (if Senate or House): Ia. House 80

cert - meter
JUL 21 2004

Sharon Savage
SIGNATURE OF TREASURER (of person filing this report)

563-263-7419
TELEPHONE

7-15-04
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 _____ REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.
(report date) Indicate one

CHECK IF AMENDMENT TO REPORT DATED 5-2-04
May 15, 04 through June 1, 04

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.) \$ 2,069.85

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 2,361.00

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 \$ 4,430.85

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

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

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) \$ 4,430.85

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 140.06

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 458.89

**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) \$ _____

Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
	<input checked="" 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)
Committee to Elect Nathan Reichert

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#	Betty A. Smith 3404 Tipton Road Muscatine, Ia. 52761	Great Aunt	\$ 50-	<input type="checkbox"/>
5/10/04	ID# CK#	Janet Kardux 1514 Magnolia Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	Loretta B. Drawbaugh 2249 41st Street Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	Vera Edwards 3020 Tipton Road Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	Thomas J. McCoy 1521 Devitt Ave Muscatine, Ia. 52761		20- 25-	<input type="checkbox"/>
5/10/04	ID# CK#	Jamesina McLeod 2236 Deer Trail Road Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	Katherine B. Willson P.O. Box 225 - 1765 115th Street West Liberty, Ia. 52776-0225		5-	<input type="checkbox"/>
5/10/04	ID# CK#	Stephen T. Holland 2306 Imperial Oaks Street Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	William R. Ramsey 2209 Imperial Oaks Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	O. Richard Magalin P.O. Box 382 Muscatine, Ia. 52761		25	<input type="checkbox"/>
SUB-TOTAL				\$ 225	250 ✓
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.

Instructions, See Back of Form

Reset Form

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect Nathan Leichert

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
5/16/04	ID# CK#	unitemized Contributions		\$ 201-	<input checked="" type="checkbox"/>
5/20/04	ID# CK#	William W. Smith 616 Pine Street Muscatine, Ia. 52761		50-	<input type="checkbox"/>
5/20/04	ID# CK#	Kristine A. Weis 2315 Stonebrook Drive Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/20/04	ID# CK#	Robert Sunderbruch 2225 Imperial Oaks Muscatine, Ia. 52761		50-	<input type="checkbox"/>
5/21/04	ID# CK#	Pam Cecil 116 Pinchurst Ave. Apt. D52 New York, NY 10033		25-	<input type="checkbox"/>
5/21/04	ID# CK#	Stacy S. Scott 455 Old Hollow Road Sperryville, VA 22740-2029		35-	<input type="checkbox"/>
5/21/04	ID# CK#	Douglas J. Ricklefs 2741 Oak Drive Muscatine, Ia. 52761		50-	<input type="checkbox"/>
5/21/04	ID# CK#	Randy Naber 402 E. 8th St. Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/21/04	ID# CK#	John N. Beckey 1923 N. Tipton Road Muscatine, Ia. 52761		50-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 511-
~~\$ 2,366-~~

TOTAL (if last page of this schedule)

2,361.-

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DISCLOSURE SUMM. Y PAGE

Reset Form

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	553
Logged In	S
Scanned	
Computer	WRS
Audited	7-16-04

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect Nathan Reichert

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 Nathan Reichert Political Party Democrat
 Office Sought Representative District (if Senate or House) Ia. House 80

See amended report

Sharon Savage
SIGNATURE OF TREASURER (or person filing this report)

563-263-7419
TELEPHONE

5-2-04
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 May 15, '04 through 6-1-04 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate one 1

JUL 16 2004
e-mail

CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

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.)

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.) \$ 2,069.85

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) 2,366.00

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 \$ 4,435.85

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

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

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) \$ 4,435.85

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 140.06

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 458.89

**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) \$ _____

Reset 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)
Committee to Elect Nathan Reichert

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 for any commercial purpose by any person other than statutory political committees.

See amended schedule

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
5/10/04	ID# CK#	Betty A. Smith 3404 Tipton Road Muscatine, Ia. 52761	Great Aunt	\$ 50-	<input type="checkbox"/>
5/10/04	ID# CK#	Janet Kardux 1514 Magnolia Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	Loretta B. Drawbaugh 2249 41st Street Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	Vera Edwards 3620 Tipton Road Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	Thomas J. McCoy 1521 Devitt Ave Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	Jamesina McLeod 2236 Deer Trail Road Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	Katherine B. Willson P.O. Box 225 - 1765 115th Street West Liberty, Ia. 52776-0225		5-	<input type="checkbox"/>
5/10/04	ID# CK#	Stephen T. Holland 2306 Imperial Oaks Street Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	William R. Ramsey 2209 Imperial Oaks Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/10/04	ID# CK#	O. Richard Maeglin P.O. Box 382 Muscatine, Ia. 52761		25	<input type="checkbox"/>
SUB-TOTAL				\$ 225	
TOTAL (if last page of this schedule)				\$	

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Reset 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)
Committee to elect Nathaw Reichert

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
5/10/04	ID# CK#	Eric T. Gearing P.O. Box 375 Clarksville, MO 63336		\$ 25-	<input type="checkbox"/>
5/16/04	ID# CK#	Elmer Reichert 3302 Tipton Road Muscatine, Ia. 52761	Grandfather	1,000-	<input checked="" type="checkbox"/>
5/16/04	ID# CK#	Helen Van Houser 3302 Tipton Road Muscatine, Ia. 52761		30-	<input checked="" type="checkbox"/>
5/16/04	ID# CK#	Stephanie D. Bankhead 422 E 14th Street Davenport, Ia 52803		50-	<input checked="" type="checkbox"/>
5/16/04	ID# CK#	Chris Clark 311 Main Street Muscatine, Ia. 52761		25-	<input checked="" type="checkbox"/>
5/16/04	ID# CK#	Mary P. Bukta 604 S. 32nd Street Clinton, Ia 52732		50-	<input checked="" type="checkbox"/>
5/16/04	ID# CK#	Betty L. McMahon 3111 188th Street Muscatine, Ia. 52761		25-	<input checked="" type="checkbox"/>
5/16/04	ID# CK#	Marlyn Schepers 413 W. 3rd Street Muscatine, Ia 52761		20-	<input checked="" type="checkbox"/>
5/16/04	ID# CK#	Brian K. Wright 1111 Oak Street Muscatine, Ia. 52761-4525		25-	<input checked="" type="checkbox"/>
5/16/04	ID# CK#	Laura H. Treimann 1514 Magnolia Muscatine, Ia. 52761		350-	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1600-	<input checked="" type="checkbox"/>
TOTAL (if last page of this schedule)				\$	

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Reset 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)
Committee to Elect Nathan Reichert

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
5/16/04	ID# CK#	unitemized Contributions		\$ 201-	<input checked="" type="checkbox"/>
5/20/04	ID# CK#	William W. Smith 616 Pine Street Muscatine, Ia. 52761		50-	<input type="checkbox"/>
5/20/04	ID# CK#	Kristine A. Weis 2315 Stonebrook Drive Muscatine, Ia 52761		25-	<input type="checkbox"/>
5/20/04	ID# CK#	Robert Sunderbruch 2225 Imperial Oaks Muscatine, Ia. 52761		50-	<input type="checkbox"/>
5/21/04	ID# CK#	Pam Cecil 116 Pinchurst Ave. Apt. D52 New York, NY 10033		25-	<input type="checkbox"/>
5/21/04	ID# CK#	Stacy S. Scott 455 Old Hollow Road Sperryville, VA 22740-2029		35-	<input type="checkbox"/>
5/21/04	ID# CK#	Douglas J. Ricklefs 2741 Oak Drive Muscatine, Ia 52761		50-	<input type="checkbox"/>
5/21/04	ID# CK#	Randy Naber 402 E. 8th St. Muscatine, Ia. 52761		25-	<input type="checkbox"/>
5/21/04	ID# CK#	John N. Beckey 1923 N. Tipton Road Muscatine, Ia. 52761		50-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 511-
\$ 2,366-

TOTAL (if last page of this schedule)

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SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on State Report of Organization)
Committee to Elect Nathan Reichert

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



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.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
 (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

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*
5/15/04	Nathan Reichert 1155 Iowa Ave Muscatine, Ia 52761	printer ink Cartridges	\$ 70.03
5/25/04	Nathan Reichert 11 55 Iowa Ave Muscatine, Ia 52761	printer ink Cartridges	70.03
SUB-TOTAL			\$ 140.06
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 140.06

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

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.

