

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1502</u>
Logged In	<u>[initials]</u>
Scanned	_____
Computer	_____
Audited	_____

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

IMPORTANT: Indicate by # type of committee you are reporting for: 4
(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 _____ Political Party (if applicable) _____
Office Sought _____ District (if Senate or House) _____

JAN 19 2005
PM 1-18

Late reports are subject to possible civil and criminal penalties.

Judy Berger Treasurer 1-563-876-3689 1/17/05
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 1-19-05 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by #

- 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.)	\$	<u>5,918.99</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>62,610.00</u>
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	<u>68,528.99</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....		<u>66,653.28</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>1,875.71</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	_____
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>13,268.31</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	_____
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input type="checkbox"/> YES <input type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	_____

For Instructions, See Back of Form

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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)
HANCOCK 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
10/28/04	ID# CK#	Paul Montover 1201 - N. 5 th St. Manchester, IA 52059		\$ 200.00	<input type="checkbox"/>
10/28/04	ID# CK#	Dubuque Co. Democratic Central Comm. P.O. Box 686 Dubuque, IA 52004-0686		500.00	<input type="checkbox"/>
10/28/04	ID# CK#	John Hancock 10385 Shane Ct. Dubuque, IA 52003	uncle	100.00	<input type="checkbox"/>
10/28/04	ID# CK#	IA Democratic Party Senate Truman Fund 5661 Fleur Dr. Des Moines, IA 50321		37,705.00	<input type="checkbox"/>
10/28/04	ID# CK#	IA Democratic Party Senate Truman Fund Event Acct. 5661 Fleur Dr. Des Moines, IA 50321-2841		6,500.00	<input type="checkbox"/>
10/28/04	ID# CK#	IA Democratic Party Senate Truman Fund 5661 Fleur Dr. Des Moines, IA 50321		5,500.00	<input type="checkbox"/>
10/28/04	ID# CK#	IA Democratic Party State acct. 5661 Fleur Dr. Des Moines, IA 50321		5,295.00	<input type="checkbox"/>
11/01/04	ID# 8026 CK# 07991	IBEW 1125 - 15 th St. NW Washington, DC 20005	N/A	5,000.00	<input type="checkbox"/>
11/05/04	ID# CK#	Joseph Daly 14097 Holly Cross Rd Farley, IA 52046		50.00	<input type="checkbox"/>
11/05/04	ID# CK#	Cash from "Get out the Vote"		360.00	<input type="checkbox"/>
SUB-TOTAL				\$61,210.00	
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.

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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)
HANCOCK 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
12/09/04	ID# CK#	Capital Consultants Suther Center, IA 50115		\$ 100.00	<input type="checkbox"/>
12/09/04	ID# - CK# 2953	MBI of Iowa 221 Park St. Box 695 Des Moines, IA 50303		250.00	<input type="checkbox"/>
12/14/04	ID# 6067 CK# 3252	Iowa Health Pac 6067 6750 Westtown Parkway #100 West Des Moines, IA 50266		150.00	<input type="checkbox"/>
12/14/04	ID# 6052 CK# 2849	Independent Insurance Agents of Iowa 4000 Westtown Parkway Ste. 200 West Des Moines, IA 50265		250.00	<input type="checkbox"/>
12/21/04	ID# 6118 CK# 2146	Iowa Optometric Assn. (IOA - PAC) 1454 - 30th St. - Ste. 204 West Des Moines, IA 50266		300.00	<input type="checkbox"/>
12/23/04	ID# 6237 CK# 1737	ABATE PAC 3118 Eastern Ave. N.E. Cedar Rapids, IA 52402		250.00	<input type="checkbox"/>
12/28/04	ID# 6078 CK# 1596	Iowa Physical Therapy PAC 1228 - 8th St. Suite 106 West Des Moines, IA 50265-2624		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 1400.

TOTAL (if last page of this schedule)

\$62,610.

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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)
HANCOCK 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
10/28/04	ID# CK#	Print 200 Box 835 Waterloo, IA 50704	Campaign flyers	\$ 224.70
10/28/04	ID# CK#	Bergan Kinney Hancock for Senate Dubuque, IA 52001	Cash for phone cards, meals + etc for election day week - end	1000.00
10/28/04	ID# CK#	Senate Truman Fund 1408 Locust St. Des Moines, IA 50309	Mailing + etc.	3135.00
11/01/04	ID# CK#	Radio Dubuque Dubuque, IA 52001	Ads on Radio	2408.00
11/01/04	ID# CK#	KMCH Radio 212 E Main St. Manchester, IA 52057	radio advertising	228.00
11/01/04	ID# CK#	KDST - FM 1931 - 20th Ave. S.E. Dyersville, IA 52040	radio advertising	268.00
10/29/04	ID# CK#	Georgian Bank Powder Springs 6-A 30073 Luc Station Acct	Wire transfer advertising	55,020.00
11/09/04	ID# CK#	Coleen Hancock 310 E. Main St. Epworth, IA 52045	Mileage 2,991 at 27¢ a mile 10-1-04 - 11/03/04	802.57
SUB-TOTAL				\$ 63,691.27
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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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)
HANCOCK 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
11/09/04	ID# CK#	Amber Brignity 206 Cherry St Anita, IA 50020	Misc. expenses	\$ 25.43
11/16/04	ID# CK#	Amber Brignity 206 Cherry St. Anita, IA 50020	additional expenses	82.32
11/29/04	ID# CK#	Dyersville Commercial P.O. Box 350 Dyersville, IA 52040-0350	Thank you in Dyersville Commercial + Cascade Pioneer	15.00
11/30/04	ID# CK#	U.S. Post office Center Av. Epworth, IA 52045	1 book roll of stamps	37.00
12/2/04	ID# CK#	Manchester Press P.O. Box C Manchester, IA	Thank you in Manchester Press Anamosa Journal	51.80
12/10/04	ID# CK#	Dubuque Leader P.O. Box 817 Dubuque, IA 52004-0817	Bal. of 10/29 ad	50.00
12/10/04	ID# CK#	Northwest Quick Stop 4039 Pennsylvania Dubuque, IA 52001	Thank you gift card	50.00
12/10/04	ID# CK#	Manchester Press Box C Manchester, Iowa 52057	ads in newspaper	606.00
SUB-TOTAL				\$ 917.55
TOTAL (if last page of this schedule)				\$

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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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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)
HANCOCK 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
12/10/04	ID# CK#	Tom Hancock 310 E. Main St. Epworth, IA 52045	Candy, T-shirts, dinners for volunteers, parade decorations,	\$ 445.69
12/15/04	ID# CK#	U.S. Post Office Epworth, IA 52045	3 books stamps	101.00
12/15/04	ID# CK#	Coleen Hancock Epworth, IA 52045	Balance on cost of stamps	10.00
12/15/04	ID# CK#	Midland Times Box #87 Wyoming, IA 52362	Thank You Ad	30.00
12/21/04	ID# CK#	Dyersville Commercial PO Box 350 Dyersville, IA 52040	1 year subscription	29.00
12/28/04	ID# CK#	Coleen Hancock 310 E. Main St. Epworth, IA 52045	Post election expenses: Cartridge, phone + mileage	585.27
12/29/04	ID# CK#	Happy's Place Rockdale Rd. Dubuque, IA 52001	Thank You Supper Food, Bar, Tax + Tip	764.60
12/31/04	ID# CK#	Manchester Press PO Box C Manchester, IA 52057	Hancock Thank You ad	36.00
SUB-TOTAL				\$ 2001.56
TOTAL (if last page of this schedule)				\$

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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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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE
B
(Rev. 07/03) MONETARY EXPENDITURES

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)
HANCOCK 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
12/31/04	ID# CK#	Monticello Shoppers Fund PO Box 191 Monticello, IA 52310	Hancock Thank you Ad	\$ 42.90
	ID# CK#			

SUB-TOTAL \$ 42.90

TOTAL (if last page of this schedule) \$ 66,653.28

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

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/27/04	La. Democratic Party Senate Majority Fund - 1408 Lucas St. Des Moines, IA 50309	N/A	mail design + production 10,300 pieces	\$ 5256.69	<input type="checkbox"/>
10/27/04	La Democratic Party Senate Majority Fund 1408 Lucas St. Des Moines, IA 50309	N/A	phoning	510.19	<input type="checkbox"/>
10/28/04	La Democratic Party Senate Majority Fund 1408 Lucas St. Des Moines, IA 50309	N/A	mail design + production 15,000 pieces	5677.50	<input type="checkbox"/>
10/28/04	La Democratic Party Senate Majority Fund 1408 Lucas St. Des Moines, IA 50309	N/A	phoning	604.57	<input type="checkbox"/>
10/30/04	La Democratic Party Senate Majority Fund 1408 Lucas St. Des Moines, IA 50309	N/A	phoning	938.86	<input type="checkbox"/>
11/01/04	La Democratic Party Senate Majority Fund 1408 Lucas St. Des Moines, IA 50309	N/A	phoning	280.50	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 13,268.31
TOTAL (if last page of this schedule) \$ 13,268.31

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.