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DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	466
Logged In	SW
Scanned	
Computer	
Audited	

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

Citizens for Maddox

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:

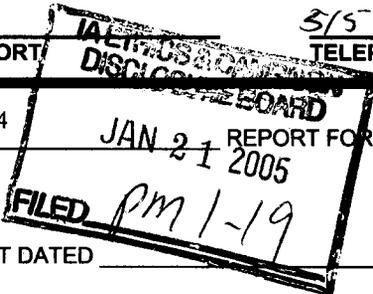
Candidate Name: O. Gene Maddox
 Political Party (if applicable): Republican

Office Sought: State Representative
 District (if Senate or House): 59

Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF PERSON FILING REPORT: *[Signature]* TELEPHONE: 315-276-1452 DATE SIGNED: 1/19/05

I AM FILING A 10/27/2004 to 12/31/2004 (report date) REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR. 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.)	\$ 14,403.62
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	685.00
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	\$ 15,088.62
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)	\$ 15,088.62
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ ----
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 2,150.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ ----
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)	\$ ----

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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)
Citizens for Maddox

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
10/29/2004	ID# 9706 CK# 1510	IMADA PAC, 4224 Merle Hay Rd, Des Moines, IA 50310	None	\$100.00	<input type="checkbox"/>
10/29/2004	ID# 6160 CK# 219	Iowa Independent Bankers PAC, 1623 22nd St, West Des Moines, IA 50266	None	200.00	<input type="checkbox"/>
10/29/2004	ID# CK#	Max Holmes, 669 Foster Dr, Des Moines, IA 50312	None	200.00	<input type="checkbox"/>
11/4/2004	ID# CK#	William & Anne Grask, 1601 NW 114th St, No 351, Clive, IA 50325	None	50.00	<input type="checkbox"/>
11/5/2004	ID# CK#	Steven Churchill, 6140 Nottingham, Johnston, IA 50131-8713	None	35.00	<input checked="" type="checkbox"/>
11/29/2004	ID# 6042 CK# 1193	Grocers PAC, 2540 106th St, Ste102, Urbandale, IA 50322	None	100.00	<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

\$ 685.00

TOTAL (if last page of this schedule)

\$ 685.00

* 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). 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 E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING 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
10/27/2004	Republican Party of Iowa 621 East 9th St, Des Moines, IA 50309	N/A	Postage for campaign flyer	\$ 650.00	<input type="checkbox"/>
10/27/2004	Republican Party of Iowa, 621 East 9th St, Des Moines, IA 50309	N/A	Print cost of campaign flyer	1,500.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 2,150.00	
TOTAL (if last page of this schedule)				\$ 2,150.00	

*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.