

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	564
Logged In	[Signature]
Scanned	
Computer	
Audited	

COMMITTEE NAME (Must be same as on Statement of Organization)
 Murphy for State Representative 10564

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 Patrick J. Murphy	Political Party (if applicable) Democrat
Office Sought State Representative	District (if Senate or House) House 28

Late reports are subject to possible civil and criminal penalties.

Dicki Krug 563/557-9198 Jan. 14, 2005
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A January 19, 2005 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by #

CHECK IF AMENDMENT TO REPORT DATED JAN 18 2005

Check if this is final (termination) report and attach Notice of Resolution 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.)	\$	434.66
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		2,175.00
Schedule F: Loans Received total (Attach Schedule F)		0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		0.00
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	2,609.66
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		216.82
Schedule F: Loan Repayments total (Attach Schedule F)		0.00
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	2,392.84
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	0.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	0.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	0.00
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)	\$	0.00

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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)
Murphy for State Representative ID # 564

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# 6478 CK# 1147	IANA-PAC Iowa Assoc. of Nurse Anesthetists - 1156 Forest Street, Carroll, Iowa 51401	—	\$ 150.00	<input type="checkbox"/>
10/28/04	ID# CK#	William Appelgate, 3107 Cottonwood Drive Waukee, Iowa 50263	—	200.00	<input type="checkbox"/>
10/30/04	ID# 9675 CK# 1044	OAAI, Pac 3101 SW 61st Street Des Moines, Iowa 50321	—	250.00	<input type="checkbox"/>
10/30/04	ID# 6034 CK# 111	Engineer's PAC 1000 Walnut Street, Suite #102 Des Moines, Iowa 50309-3433	—	400.00	<input type="checkbox"/>
11/2/04	ID# CK#	Thomas Rhomburg, 1510 Kehl Court - Apt. 6 Dubuque, Iowa 52003-7871	—	25.00	<input type="checkbox"/>
* 11/10/04	ID# VSR CK# 007256	HSBC North America PAC 2700 Sanders Road Prospect Heights, IL 60070	—	200.00	<input type="checkbox"/>
* 11/12/04	ID# VSR CK# 3453	3M PAC 3M Center St. Paul, Mn 55144	—	250.00	<input type="checkbox"/>
11/26/04	ID# 6077 CK# 1760	Iowa Pharmacy PAC 8515 Douglas, Suite 16 Des Moines, Iowa 50322	—	250.00	<input type="checkbox"/>
* 12/17/04	ID# VSR CK# 1336	Aventis Pharmaceuticals Inc. 801 Pennsylvania Ave. NW Ste. 725 Washington, DC 20004	—	300.00	<input type="checkbox"/>
12/27/04	ID# 6078 CK# 1615	Iowa Physical Therapy PAC 1228 8th Street - Suite 106 West Des Moines, Iowa 50265-2624	—	100.00	<input type="checkbox"/>

* VSR form on file w/ campaign

SUB-TOTAL

\$ 2125.00

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)
Murphy for State Representative ID #564

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
12/27/04	ID# 6435 CK# 1083	Iowa Insurance Institute PAC 729 Insurance Exchange Building Des Moines Iowa 50309	—	\$ 50.00	<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"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 50.00	
TOTAL (if last page of this schedule)				\$ 2,175.00	

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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)
Murphy for State Representative ID# 564

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#	Dupaco Credit Union 3299 Hillcrest Dubuque, Iowa 52001	ATM charge	\$.54
10/28/04	ID# CK# 849	U.S. Postmaster 350 W. 6th Street Dubuque, Iowa 52001	postage to mail Oct. 29 report	4.88
11/1/04	ID# CK# 850	Cartel Printing 1739 East Grand Avenue Des Moines, Iowa 50316	printing of 60 yard signs	211.40
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 216.82

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).)