

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1490
Logged In	<i>[Signature]</i>
Scanned	
Computer	WRS
Audited	8-17-05

COMMITTEE NAME (Must be same as on Statement of Organization)
SHOMSHOR FOR IOWA HOUSE

IMPORTANT: Indicate by # type of committee you are reporting for: 1
 (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: PAUL SHOMSHOR Political Party (if applicable): DEMOCRAT
 Office Sought: IOWA HOUSE District (if Senate or House): 100

Late reports are subject to possible civil and criminal penalties.

Paul Shomshor 712-325-0638 08/01/05
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

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

CHECK IF AMENDMENT TO REPORT DATED JANUARY 19, 2005
 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>51B 10,820.32</u>	<u>10,790.32</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	<u>51B 779.94</u>	<u>579.94</u>
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		
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>11,370.26</u>
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)		<u>11,370.26</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>- 0 -</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>- 0 -</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>- 0 -</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)		<u>YES X NO</u>
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>- 0 -</u>

For 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)
SHOMSHOR FOR IOWA HOUSE

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
✓ 11/01/04	ID# 6042 CK# 1191	GROCERS PAC 2540 106TH ST - STE 102 DES MOINES IA 50322		\$ 250.00	<input type="checkbox"/>
✓ 11/01/04	ID# 6163 CK# 2932	IOWA SOFT DRINK PAC 801 GRAND - STE 3100 DES MOINES IA 50309		250.00	<input type="checkbox"/>
12/31/04	ID# CK#	PEOPLES NATIONAL BANK - INTEREST BOX 557 COUNCIL BLUFFS IA 51502		79.94	<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"/>

RECEIVED
AUG - 5 2005

SUB-TOTAL
\$ 579.44
TOTAL (if last page of this schedule)
\$ 579.44

* 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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For Office Use Only	
Comm. #	1490
Logged In	e e
Scanned	✓
Computer	WRS
Audited	7-8-05 ✓

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

SHOMSHOR FOR IOWA HOUSE

JAN 18 2005

IMPORTANT: Indicate by # type of committee you are reporting for: 1 *nd*
 (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)
PAUL SHOMSHOR	DEMOCRAT
Office Sought	District (if Senate or House)
IOWA HOUSE	100

Late reports are subject to possible civil and criminal penalties.

Paul Shomshor 712-375-0638 01/18/05
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 # 2

CHECK IF AMENDMENT TO REPORT DATED See amended report
 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.)	\$	10,820.32
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		200.00 ✓
Schedule F: Loans Received total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	11,020.32
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		330.00 ✓
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)	\$	10,790.32
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	- 0 -
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	- 0 -
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	- 0 -
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 -

FOR INSTRUCTIONS, SEE BACK OF 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)
SHOMSHOR FOR IOWA HOUSE

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
<i>12/12/04</i>	<i>ID# CK# 1025</i>	<i>CARTER PRINTING 1739 E. GRAND AVE DM IA 50316</i>	<i>CAMPAIGN LITERATURE</i>	<i>\$ 230.00</i>
	ID# CK#			

SUB-TOTAL \$ *230.00*

TOTAL (if last page of this schedule) \$ *230.00*

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).)