

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

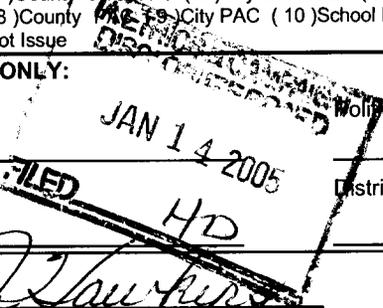
Reset Form

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|------------------------------------|--------------------------|
| FORM DR-2 (Rev. 07/2004) | DISCLOSURE REPORT |
| For Office Use Only | |
| Comm. # <u>6248</u> | |
| Logged In <u>KH</u> | |
| Scanned _____ | |
| Computer _____ | |
| Audited _____ | |

COMMITTEE NAME (Must be same as on Statement of Organization) #6248
 American Federation of State, County, Municipal Employees Local 1868 Polk County

IMPORTANT: Indicate by # type of committee you are reporting for: 2
 (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 Candidate (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) _____



Late reports are subject to possible civil and criminal penalties.

David J. Lawrence 515-286-3661 1-12-05
SIGNATURE OF PERSON FILING REPORT **TELEPHONE** **DATE SIGNED**

I AM FILING A December 31, 2004 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.)\$ 961.11

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 337.95

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\$ 1299.06

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 139.68

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)\$ 1159.38

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

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

****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) \$ _____

For Instructions, See Back of Form

Reset 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)

#6248

COMMITTEE NAME (Must be same as on Statement of Organization)
American Federation of State, County, Municipal Employees Local 1868 Polk Co

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 |
|--|--|---|--|-----------------|-----------------------------|
| 10/20/04, 11/3/04, 11/17/04, | ID# CK# | Gary Ahn 409 W Broadway Colfax, IA 50054 | | \$ 15.00 | <input type="checkbox"/> |
| 12/11/04, 12/15/04 | ID# CK# | Barbara Post-Althaus 1510 Thompson Des Moines, IA 50312 | | 2.50 | <input type="checkbox"/> |
| | ID# CK# | James Appleby 1321 E 27th Court Des Moines, IA 50317 | | 20.00 | <input type="checkbox"/> |
| | ID# CK# | Gary Ash 2335 E 34th Street Des Moines, IA 50317 | | 12.50 | <input type="checkbox"/> |
| | ID# CK# | Angela Barnes 2719 42nd Street Des Moines, IA 50310 | | 5.00 | <input type="checkbox"/> |
| | ID# CK# | Fred Beattie 507 Brown Street Runnells, IA 50237 | | 5.00 | <input type="checkbox"/> |
| | ID# CK# | William Bernard 1531 Searle Des Moines, IA 50317 | | 5.00 | <input type="checkbox"/> |
| | ID# CK# | Robert Conley Jr 300 Walnut #79 - 1203 Des Moines, IA 50309 | | 15.00 | <input type="checkbox"/> |
| | ID# CK# | Pam Conner 2715 E 40th Des Moines, IA 50317 | | 15.00 | <input type="checkbox"/> |
| ↓ | ID# CK# | Angela Connolly 4707 Beaver Des Moines, IA 50310 | | 5.00 | <input type="checkbox"/> |
| SUB-TOTAL | | | | \$ 100.00 | |
| 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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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

#6248

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

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

American Federation of State, County, Municipal Employees Local 1868 Polk Co

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 |
|---------------------------------------|--|---|--|-----------------|-----------------------------|
| 10/20/04, 11/3/04, 11/17/04, | ID# CK# | Connie Ewing 25452 - 275th Street Leon, IA 50144 | | \$ 5.00 | <input type="checkbox"/> |
| 12/1/04, 12/15/04 | ID# CK# | Daniel Flaherty 3924 Richmond Avenue Des Moines, IA 50317 | | 30.00 | <input type="checkbox"/> |
| | ID# CK# | David Hawkins 615 SE Titus Des Moines, IA 50315 | | 25.00 | <input type="checkbox"/> |
| | ID# CK# | David Hibbard 1042 Badger Creek Rd Van Meter, IA 50261 | | 30.00 | <input type="checkbox"/> |
| | ID# CK# | Marci Hines 2112 E 24th St Des Moines, IA 50317 | | 20.00 | <input type="checkbox"/> |
| | ID# CK# | Paul Houston 5644 Northview Place West Des Moines, IA 50266 | | 2.50 | <input type="checkbox"/> |
| | ID# CK# | Joel Johnson 10398 NW 44th Polk City, IA 50226 | | 25.00 | <input type="checkbox"/> |
| | ID# CK# | Mark Jones 207 Hart Ave Des Moines, IA 50315 | | 12.50 | <input type="checkbox"/> |
| | ID# CK# | Vaughn E Lewis 4501 Marcourt Lane West Des Moines, IA 50266 | | 10.45 | <input type="checkbox"/> |
| ✓ | ID# CK# | Marlin Luig Box 316 Bondurant, IA 50035 | | 25.00 | <input type="checkbox"/> |
| SUB-TOTAL | | | | \$ 185.45 | |
| 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.

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)

#6248

COMMITTEE NAME (Must be same as on Statement of Organization)
American Federation of State, County, Municipal Employees Local 1868 Polk Co

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 |
|--|--|---|--|-----------------|-----------------------------|
| 10/20/04, 11/3/04, 11/17/04 | ID# CK# | Larry Noble 3311 E Aurora Des Moines, IA 50317 | | \$ 12.50 | <input type="checkbox"/> |
| 12/1/04, 12/15/04 | ID# CK# | Charles Ripley PO Box 27122 West Des Moines, IA 50265 | | 5.00 | <input type="checkbox"/> |
| ↓ | ID# CK# | Myndi Scharf 3249 Indianapolis Ave Des Moines, IA 50317 | | 5.00 | <input type="checkbox"/> |
| | ID# CK# | Larry Thomsen 404 Grant St, N Bondurant, IA 50317 | | 5.00 | <input type="checkbox"/> |
| | ID# CK# | Charles F. Verheul 107 4th Street, NW Mitchellville, IA 50169 | | 20.00 | <input type="checkbox"/> |
| | ID# CK# | James Ward 4045 46th Des Moines, IA 50310 | | 5.00 | <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 | | | | \$ 52.50 | |
| TOTAL (if last page of this schedule) | | | | \$ 337.95 | |

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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.

#6248

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| SCHEDULE B (Rev. 09/97) | MONETARY EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

COMMITTEE NAME (Must be same as on Statement of Organization)
 American Federation of State, County, Municipal Employees Local 1868
 Polk County

| 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 |
|--|--|--|--------------------------------|------------------|
| 10/15/04 | ID# CK# | US Bank 520 Walnut St Des Moines, IA 50309 | October 2004 Monthly Fee | \$ 3.00 |
| 11/16/04 | ID# CK# | US Bank 520 Walnut St Des Moines, IA 50309 | November 2004 Monthly Fee | 3.00 |
| 12/27/04 | ID# CK# 1114 | AFSCME PEOPLE 1625 L Street, NW Washington, DC 20036 | Specific Intent Donation | 133.68 |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$ |
| TOTAL (if last page of this schedule) | | | | \$ 139.68 |

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 56.6(3)(i).)