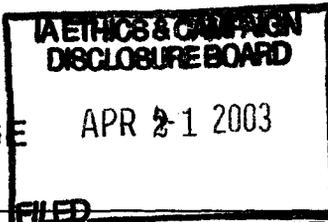


FOR INSTRUCTIONS, SEE BACK OF FORM



DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/98) DISCLOSURE REPORT. For Office Use Only: Comm. # 21061, Indexed JW, Audited, Computer.

COMMITTEE NAME (Must be same as on Statement of Organization) 3R's Committee. IMPORTANT: Indicate type of committee you are reporting for: 6. (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support Slate of Candidates

SIGNATURE OF TREASURER (or person filing this report) Albert J. Souwren TELEPHONE 515-432-4089

DATE SIGNED 4-16-03

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A April 17-2003 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR. (report date) Indicate one 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 Notice of Dissolution is filed.)

Local Committees, enter Date of Election 4-22-03. County & Local Committees, enter County in which Election is held Boone

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$1180.81), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 587.93, Schedule F: 0, Schedule H: 0), SUB-TOTAL (\$1768.74), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: 460.-), CASH ON HAND at the end of this reporting period (\$1308.74).

Table with columns for description and amount. Rows include: UNPAID BILLS (\$1159.50), IN KIND CONTRIBUTIONS (\$0), OUTSTANDING LOANS (\$0).

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES X NO. VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
3 A's Committee

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/YY)	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
3-31-03	ID# CK# —	Dividend on Acct. Boone Co. Comm. Credi. Union 817-8th St. Boone-Ia. 50036		\$ 13.93	
4-4-03	ID# CK# —	Arthur Sturtz. cash 1830-120th St. Boone-Ia. 50036		20.-	
4-4-03	ID# CK# —	Misc. Donations @ meeting none arr 5.00		54.00	
4-8-03	ID# CK# —	Edward Mondt cash 918-54th st Boone-Ia. 50036		200.-	
4-8-03	ID# CK# —	Linda Buchanan cash 804 story st Boone-Ia. 50036		200.-	
4-8-03	ID# CK# —	Tom Crooks- check 1709- Benton st Boone-Ia. 50036		100.-	
	ID# CK#				
SUB-TOTAL				\$ 587.93	
TOTAL (if last page of this schedule)				\$ 587.93	

* 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) (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.

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

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.

COMMITTEE NAME (Must be same as on Statement of Organization)
3 R's Committee

DATE EXPENDED (MM/DD/YYR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
<i>4/15/03</i>	ID# CK#	<i>K.W.B.G. Radio 724 - Story St Boone - Ia. 50036</i>	<i>45-30 Sec spots</i>	<i>\$ 400.00</i>
<i>4/15/03</i>	ID# CK#	<i>Boone Cultural Center 6th & Story Boone - Ia. 50036</i>	<i>2 meetings</i>	<i>60.-</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 460.-</i>
TOTAL (if last page of this schedule)				<i>\$ 460.-</i>

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).)

