DISCLOSURE SUMMARY PAGE

DR-2 (Rev. 01/98) | DISCLOSURE REPORT

For Office Use Only Clinton
Comm. # 17125
Indexed do
Audited
Computer

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Committee To Elect Steve Mangan Recorder

IMPORTANT: Indicate type of committee you are reporting for: 4

(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

James A. Gravert — 563-659-9237 — 1/12/03
SIGNATURE OF TREASURER (or person filing this report) **TELEPHONE** **DATE SIGNED**

Routine Penalties Due For Late Filed Reports Range from $20 to $600

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
JAN 21 2003
FILED

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A January 19 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
11-5-02
County & Local Committees, enter County in which Election is held
Clinton

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies 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.) ....$	351 41
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A)	490 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.....$	841 41
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B)	659 32
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) ....$	182 09

UNPAID BILLS (From Schedule D - Attach Schedule D) ....$	25 38
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ....$	859 82
OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ....$	1,000 00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ___ YES ___ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ _____

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

A (Rev. 06/97)	MONETARY RECEIPTS

☐ CHECK THIS BOX IF AMENDING FORM

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

Committee To Elect Steve Manyan Recorder

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
10-17-02	ID# CK#	Mary Wylie 24722 - 270 ST. PRINCETON, IOWA 52768	Sister	$ 75.00	
10-21-02	ID# CK#	Paul Kuehn 3115 - 220th ST. DeWitt IA 52742		40.00	
10-22-02	ID# CK#	DeWitt Republican Women C/o IRENE SCHMIDT 221 - 13th Ave DeWitt IOWA 52742		50.00	
10-22-02	ID# CK#	Linda Carlton 463 Pickens CT Rock Hill SC 29730		100.00	
10-24-02	ID# CK#	Steve + Mary Manyan 2223 - 320 Ave. DeWitt, IOWA 52742	Candidate and Sponse	200.00	
11-14-02	ID# CK#	Dean Nielson 3632 260th ST. Camanche, IA. 52730		25.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $

TOTAL *(if last page of this schedule)* $ 490.00

* 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) (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.

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE **B** (Rev. 09/97)	MONETARY EXPENDITURES

☐ 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)*

Committee To Elect Steve Mangan Recorder

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
11-11-02	ID# CK#	The Observer 512 - 7 ST De Witt, IA 52742	Newspaper Ad.	$ 38.72
11-11-02	ID# CK#	Clinton Herald 212 - 6 Ave S. Clinton IA. 52732	Newspaper Ad.	37.80
10-24-02	ID# CK#	The Observer 512 - 7 ST. DeWitt, IA 52742	Newspaper Ad	193 99
10-25-02	ID# CK#	Clinton Herald 212 - 6 Ave. S. Clinton IA 52732	Newspaper Ad	343 31
11-12-02	ID# CK#	The Community Scoop Lost Nation, IA. 52254	Newspaper Ad	20.50
12-23-02	ID# CK#	De Witt Chamber of Commerce De Witt IA. 52742	Coupons to give To campaign workers	25 00
	ID# CK#			
	ID# CK#			

SUB-TOTAL $

TOTAL *(if last page of this schedule)* $ 659.32

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).)

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS

☐ CHECK THIS BOX IF AMENDING FORM

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

Committee To Elect Steve Mangan Recorder

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD (DO NOT INCLUDE LOANS – SHOW LOANS ON SCHEDULE F)

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
9-16-02	Clinton Printing Co. INC. 1402 Roosevelt St. P.O. Box 64 Clinton, IN. 47933-0064	Print & cut Advertising material	$ 25-38
		SUB-TOTAL	$
		TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD	$ 25 38

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1 (for Schedule D)

CANDIDATE COMMITTEES NOTE:
*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Committee To Elect Steve Mangan Recorder

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS

☐ 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
10-26-02	Clinton County Republican Women's Club Carolyn Tallett Treasurer		Newspaper Ad	$ 56.00	
10-22-02	Wayne Wilke 1116 6th Ave N. Clinton, IA. 52732		Newspaper Ad	47.60	
11-2-02	Wayne Wilke 1116 6th Ave. N. Clinton, IA. 52732		Newspaper Ad	19.36	
9-17-02	[redacted] Steve Mangan 2223 330th Ave DeWitt IA 52742	Candidate	Pd for Caps for Advertising	205.44/100	
9-20-02	Steve Mangan 2223 330th Ave DeWitt, IA, 52742	Candidate	Pd for Sign stakes	130.54	
10-23-02	Steve Mangan 2223 330th Ave DeWitt IA. 52742	Candidate	Pd for Radio Ad.	157.50	
10-23-02	Steve Mangan 2223 330th Ave DeWitt IA 52742	Candidate	Pd for Radio Ad.	159.38	
10-23-02	Steve Mangan 2223 330th Ave DeWitt IA 52742	Candidate	Pd for Radio Ad	84.00	
			SUB-TOTAL	$	
			TOTAL (If last page of this schedule)	$ 859.82	

*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.

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE F (Rev. 08/96)	LOANS RECEIVED & REPAID

☐ CHECK THIS BOX IF AMENDING FORM

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

Committee To Elect Steve Mangan Recorder

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD $ 1,000 00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			$

TOTAL *(PART I)* $ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			$

TOTAL CASH REPAYMENTS *(PART II)* $ _____

From Schedule E -- TOTAL LOANS FORGIVEN $ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD $ 1,000 00

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