Clinton

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 03/2003)	DISCLOSURE REPORT

For Office Use Only
Comm. # 2116D
Logged In SW
Scanned
Audited
Computer ok

COMMITTEE NAME *(Must be same as on Statement of Organization)*
CLINTON INSTRUCTIONAL SUPPORT LEVY

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

CANDIDATE COMMITTEES ONLY:

Candidate Name _____ Political Party _____

Office Sought _____ District (if Senate or House) _____

RECEIVED MAR 26 2003

W. Thomas Kelly — 563 243 3823 — 3/26/03
SIGNATURE OF TREASURER (or person filing this report) **TELEPHONE** **DATE SIGNED**

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 3/26/03 (report date) REPORT FOR AN/A (1) **ELECTION** /(~~2)NON-ELECTION~~ YEAR.

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
4/1/03

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. (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.) ..... $ — 0 —

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 4,858.00

Schedule F: Loans Received total (Attach Schedule F) ..... — 0 —

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... — 0 —

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... $ 4,858.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 2,000.00

Schedule F: Loan Repayments total (Attach Schedule F) ..... — 0 —

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... $ 2,858.00

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

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... $ 1,902.50

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... $ — 0 —

CANDIDATE COMMITTEES ONLY:

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

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ — 0 —

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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)*

CLINTON INSTRUCTIONAL SUPPORT LEVY

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
3/14/03	ID# CK# 2761	LESTER SHIELDS 520 OAKHURST DR. CLINTON, IA 52732		$ 50.00	☐
3/14/03	ID# CK# 2248	THEA ENGELSON 1113 - NO. 13th ST. CLINTON, IA 52732		150.00	☐
3/14/03	ID# CK# 15442	JERRY WHEELER 221 MAIN CLINTON, IA 52732		100.00	☐
3/17/03	ID# CK# 8825	H.G. LAMONT 2100 S. 21st ST. CLINTON, IA 52732		25.00	☐
3/17/03	ID# CK# 4369	CLINTON AREA DEVELOPMENT CORP. 2100 S. 21st ST. CLINTON, IA 52732		100.00	☐
3/17/03	ID# CK# 3036	JACK PRINGLE 712 - NO. 13th ST. CLINTON, IA 52732		25.00	☐
3/17/03	ID# CK# 1354	JEFFERSON PTA 723 - 2ND AVE SO. CLINTON, IA 52732		50.00	☐
3/17/03	ID# CK# 3446	JAMES TUISL 724 - NO. 2ND ST. CLINTON, IOWA 52732		25.00	☐
3/18/03	ID# CK# 1121	TOM KELLY 3911 - 2ND AVE SO. CLINTON, IA 52732		50.00	☐
3/18/03	ID# CK# 1979	RANDALL GLEGG 604 - 12th AVE NO. CLINTON, IA 52732		100.00	☐
			SUB-TOTAL	$ 675.00	
			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) (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

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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)*

CLINTON INSTRUCTIONAL SUPPORT LEVY

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.

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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
3/19/03	ID# CK# 1235	STEVE HOWES 1114 NO. 5th ST. CLINTON, IA 52732		$ 100.00	☐
3/19/03	ID# CK# 14853	BEV HERMAN 829-12th AVE SO. CLINTON, IA 52732		25.00	☐
3/19/03	ID# CK# 16433	Suzanne Rose 4426 Bellevue Rd. Clinton, IA 52732		200.00	☐
3/19/03	ID# CK# 3064	Stephen Haufe 1464 8th AVE. So. Clinton, IA 52732		150.00	☐
3/19/03	ID# CK# 2365	Karen Conzett 1624 - 8th AVE. So. Clinton, IA 52732.		100.00	☐
3/19/03	ID# CK# 3519	Dennis Duerling 3330 Valley Oaks Ct. Clinton, IA 52732		10.00	☐
3/19/03	ID# CK# 1984	Jeanette Hartung-Schroeder 900 N. 7th Street Bellevue, IA 52031-1513		125.00	☐
3/19/03	ID# CK# 8115	Richard O'Leary 1008 Briar Cliff Ln. Clinton, IA 52732		50.00	☐
3/19/03	ID# CK# 1475	Brenda Thornton 1470 Main AVE. Clinton, IA 52732		100.00	☐
3/19/03	ID# CK# 1500	Jane McLatchie 1216 N. 7th Street Clinton, IA 52732		100.00	☐
			SUB-TOTAL	$ 960.00	
			TOTAL *(if last page of this schedule)*	$	

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For Instructions, See Back of Form

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SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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)*

CLINTON INSTRUCTIONAL SUPPORT LEVY

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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
3/19/03	ID# CK# 4387	Dennis Schoening, CFP 204 Fourth Ave. So. Clinton, IA 52732		$ 200.00	☐
3/19/03	ID# CK# 5990	A. John Frey P.O. Box 668 Clinton, IA 52732		150.00	☐
3/19/03	ID# CK# 2773	Kim Mulholland 4384 Hwy 136 Clinton, IA 52732		50.00	☐
3/20/03	ID# CK# 1659	William Cotter 1018 9th Ave. north Clinton, IA 52732-3441		25.00	☐
3/20/03	ID# CK# 1660	Sethness Products 1018 9th Ave. north Clinton, IA 52732-3441		50.00	☐
3/20/03	ID# CK# 6289	Brian Angwin 645 12th Ave. north Clinton, IA 52732		50.00	☐
3/20/03	ID# CK# 3792	Jane Teney 1537 12th Ave. north Clinton, IA 52732		20.00	☐
3/20/03	ID# CK# 7957	VanKampen Therapeutic Massage Center 113 - 4th Ave. So. Clinton, IA 52732		50.00	☐
3/20/03	ID# CK# 13144	Derald Dosland D.D.S., P.C. 400 So. 2nd St. Clinton, IA 52732		50.00	☐
3/20/03	ID# CK# 8761	Banner Home Furnishings 516 So. 1st Street Clinton, IA 52732		100.00	☐
			SUB-TOTAL	$ 745.00	
			TOTAL *(if last page of this schedule)*	$	

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For Instructions, See Back of Form

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SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ 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)*

CLINTON INSTRUCTIONAL SUPPORT LEVY

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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
3/20/03	ID# CK# 28695	Clausen Companies - Clausen Supply Clausen Trucking - Clausen Warehousing 1219 So. 2nd St. P.O. Box 1386 Clinton, IA 52733-1386		$ 100.00	☐
3/20/03	ID# CK# 4158	McKinney Dental Assoc, P.C. 400 So. 2nd St. Clinton, IA 52732		100.00	☐
3/20/03	ID# CK# 5520	James F. Voss Agency, Inc. 819 North 2nd St. Clinton, IA 52732		100.00	☐
3/21/03	ID# CK# 2651	Brigham Tubbs 1112 north 3rd St. Clinton, IA 52732		50.00	☐
3/21/03	ID# CK# 5315	Cynthia Rasche-Moore 808 14th Place Camanche, IA 52730		25.00	☐
3/21/03	ID# CK# 3041	Joan Pringle 712 north 13th St. Clinton, IA 52732		100.00	☐
3/21/03	ID# CK# 5479	Arica Doggett-Jansen 757 - 7th ave. S. Clinton, IA 52732		75.00	☐
3/21/03	ID# CK# 9960	David Gassman 1301 main Ave. Clinton, IA 52732		20.00	☐
3/21/03	ID# CK# 3717	Marlys Paul 1222 whittier Ct. Clinton, IA 52732		25.00	☐
3/21/03	ID# CK# 2153	Peter Davis 1451 old Freeport Place Bettendorf, IA 52722		100.00	☐
			SUB-TOTAL	$ 695.00	
			TOTAL *(if last page of this schedule)*	$	

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For Instructions, See Back of Form

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

Reset Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME *(Must be same as on Statement of Organization)*
CLINTON INSTRUCTIONAL SUPPORT LEVY

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.

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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
3/21/03	ID# CK# 2382	William Conley 1319 9th St. N.W. Clinton, IA 52732		$ 15.00	☐
3/21/03	ID# CK# 3757	T. Randy Current 519 N. 9th St. Clinton, IA 52732		30.00	☐
3/21/03	ID# CK# 2592	Michelle Pearson 1204 N. 7th St. Clinton, IA 52732		100.00	☐
3/24/03	ID# CK# 4832	Richard Grugin 2617 N. 11th St. Clinton, IA 52732		25.00	☐
3/24/03	ID# CK# 4247	Citizens First Bank 1442 Lincolnway Clinton, IA 52732		100.00	☐
3/24/03	ID# CK# 19299	Gateway State Bank 1427 north 2nd St. Clinton, IA 52732		100.00	☐
3/24/03	ID# CK# 9660	Edward Howes P.O. BOX 1064 Clinton, IA 52733-1064		100.00	☐
3/24/03	ID# CK# 3670	Kenneth P. Carlson, D.D.S. 2228 north 2nd St. Clinton, IA 52732		50.00	☐
3/24/03	ID# CK# 81645	The Insurance Group 724 N. 2nd St. Clinton, IA 52732		50.00	☐
3/24/03	ID# CK# 000598	Heartland Regional Council of Carpenters 218 1st ave. Sterling, IL 61081-3945		600.00	☐
			SUB-TOTAL	$1,170.00	
			TOTAL *(if last page of this schedule)*	$	

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For Instructions, See Back of Form

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SCHEDULE A (Rev. 06/97) MONETARY RECEIPTS

☐ 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)*

CLINTON INSTRUCTIONAL SUPPORT LEVY

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

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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
3/24/03	ID# CK# 8248	ABSTRACT & Title Guaranty Co. 326 - 5th AVE. So. Clinton, IA 52732		$ 150.00	☐
3/24/03	ID# CK# 014165	Clinton Engineering Co. Inc. 2101 Lincolnway Clinton, IA 52732		100.00	☐
3/24/03	ID# CK# 073475	Frontier Management Group Best Western Frontier & Country Inn & Suites Clinton, IA 52732		100.00	☐
3/24/03	ID# CK# CASH	Unitemized		63.00	☐
3/25/03	ID# CK# 9090	Alma Mariano 511 Oakhurst Dr. Clinton, IA 52732		30.00	☐
3/26/03	ID# CK# 15913	QUALITY CONCRETE CO. 327-17th AVE NO. CLINTON, IA 52732		100.00	☐
3/26/03	ID# CK# 7430	MICHELE CULLEN 1320 CAROLINE DR. CLINTON, IA 52732		25.00	☐
3/26/03	ID# CK# 1476	SANDRA BURACKER 2441-29th ST. MOLINE, IL 61265		25.00	☐
3/26/03	ID# CK# CASH	UNITEMIZED		20.00	☐
	ID# CK#				☐

SUB-TOTAL $ 613.00

TOTAL *(if last page of this schedule)* $ 4,858.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

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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)*

CLINTON INSTRUCTIONAL SUPPORT LEVY

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
3/24/03	ID# CK# 100	ON MEDIA 112 N. 2ND ST. CLINTON, IA 52732	TELEVISION ADVERTISING	$2,000.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$2,000.00
			TOTAL ***(if last page of this schedule)***	$2,000.00

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 56.6(3)(i).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME *(Must be same as on Statement of Organization)*
CLINTON INSTRUCTIONAL SUPPORT LEVY

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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
3/20/03	CLINTON PRINTING CO. 1406 ROOSEVELT CLINTON IA 52732		YARD SIGNS	$ 452.50	☐
3/24/03	CINDY RASCHE 305-13th AVE CAMANCHE, IA 52730		POSTERS	25.00	☐
3/24/03	CLINTON PRINTING CO. 1406 ROOSEVELT CLINTON, IA 52732		DOOR HANGERS	635.00	☐
3/24/03	CLINTON PRINTING CO. 1406 ROOSEVELT CLINTON, IA 52732		DIRECT MAIL FLIER	790.00	☐
					☐
					☐
					☐
					☐
					☐
					☐

SUB-TOTAL $ 1,902.50

TOTAL (If last page of this schedule) $ 1,902.50

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Page 1 of 1 (for Schedule E)