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FOR INSTRUCTIONS, SEE BACK OF FORM

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

For Office Use Only
Comm. # 21099
Indexed SN
Audited
Computer

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME *(Must be same as on Statement of Organization)*
ALOT (Against Local Option Tax)

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

Richard Spencer 319-393-6446

SIGNATURE OF TREASURER (or person filing this report) **TELEPHONE** **DATE SIGNED**

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

JAN 13 2003

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 19 January 2003 REPORT FOR AN/A (1) **ELECTION** /(2)**NON-ELECTION** YEAR.
(report date) Indicate one 2

☐ 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 _____

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.) ..... $ $153.45

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 0.00

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.....$ $153.45

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 0.00

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) ..... $ $153.45

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

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)*
ALOT (Against Local Option Tax)

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
✓	ID# CK#	No Income		$ 0.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 0.00

TOTAL *(if last page of this schedule)* $ 0.00

* 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)*
ALOT (Against Local Option Tax)

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
✓	ID# CK#	No Expenditures		$ 0.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$ 0.00
			TOTAL (*if last page of this schedule*)	$ 0.00

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).)

To report errors or make inquiries about loans marked with an * write to:

STATEMENT OF ACCOUNT

To report or make inquiries about electronic fund transfers "EFT", write to address on left or call:

COLLINS COMMUNITY CU 1-800-475-1150
1150 42ND ST NE
P O BOX 10500
CEDAR RAPIDS IA 52410-0500

319-393-9000

1937100-22905

Each loan marked * is an open end loan. The balance used to compute the finance charge on open-end loans is the unpaid principal balance at the time of the transaction. On the date an advance is taken, the amount of the advance is added to the unpaid principal balance. On the date a payment is made, the finance charge and any late charges due are deducted from the payment amount and the remainder, if any, is subtracted from the unpaid principal balance.

The Annual Percentage Rate (APR) is shown in the loan summary below. The phrase "(MAY VARY)" means that this loan has a variable Annual Percentage Rate.

STATEMENT PERIOD	
FROM	TO
12-01-02	12-31-02
MEMBER NUMBER	
126032 009	
- -	1
SOC. SEC. NUMBER	PAGE

MDG2002 00021105 1 AV 0278 09231S

JAN 13 2003

AGAINST LOCAL OPTION TA 5240226
RICHARD L SPENCER 10
2524 FALCON DR NE 021105
CEDAR RAPIDS IA 52402-2610

DATE MO/DAY/Y	TYPE OF ACCOUNT / TYPE OF TRANSACTION	LOAN PAYMENT AMOUNT	FINANCE CHARGE	FEE OR LATE CHARGES	CHANGE TO BALANCE	BALANCE
12 01 2	SHARE SAVINGS			PREVIOUS BALANCE		500
12 31 2				NEW SHARE BALANCE		500
12 01 2	SHARE DRAFT BASIC			PREVIOUS BALANCE		15345
12 31 2				NEW SHARE BALANCE		15345

********** 2002 YEAR-TO-DATE FINANCIAL SUMMARY ********** ----------

DIV/INT PAID	DIV/INT WITHHOLDING	MORTGAGE POINTS	MORTGAGE LATE CHG	MORTGAGE FINANCE CHG	OTHER NON-MTG FINANCE CHG
0.00	0.00	0.00	0.00	0.00	0.00

THE FOLLOWING FEES WILL CHANGE EFFECTIVE 2/1/2003
OVERDRAFT FEE-DRAFT OR ACH- EACH $20.00* NO MAXIMUM PER DAY
STOP PAYMENT-DRAFT OR ACH-$15.00*
DEPOSITED ITEMS RETURNED $5.00*PER ITEM *ADD SALES TAX

This statement is a permanent record of your account. Income tax information appears at the end