

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

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

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

CANDIDATE COMMITTEES ONLY:

Candidate Name KEYVIN CONWAY Political Party _____

Office Sought URBANDALE CITY COUNCIL District (if Senate or House) _____

MAR 3 2004

Mr J Cronin
SIGNATURE OF TREASURER (or person filing this report)

515-480-3460
TELEPHONE

November 30, 2003
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 November 30, 2003 REPORT FOR AN/A (1) ELECTION (2)NON-ELECTION YEAR.
(report date) Indicate one

CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election <u>11-04-03</u>
County & Local Committees, enter County in which Election is held <u>POLK</u>

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.)

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.)\$ 222.22

ADD TOTAL MONEY TAKEN IN THIS PERIOD INTEREST .04

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 310.00

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.....\$ 532.26

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

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

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).....\$ 532.26

**UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 1,384.06

*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) \$ -0-

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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)

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

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
11-2-03	ID# CK#	MARY CLARK 7319 MARLE URBANDALE, IA 50322	NONE	\$ 50.00	<input type="checkbox"/>
11-2-03	ID# CK#	RANDAL WALTERS P.O. Box 71094 CLIVE, IA	NONE	100.00	<input type="checkbox"/>
11-2-03	ID# CK#	JOHN C. KLINE P.O. Box 71094 CLIVE, IA	NONE	100.00	<input type="checkbox"/>
11-2-03	ID# CK#	NORMAN CONWAY DALLAS, TEXAS	FATHER	50.00	<input type="checkbox"/>
11-2-03	ID# CK#	CHARLES ILL 804 57th ST WEST DES MOINES IA 50266	NONE	10.00	<input type="checkbox"/>
	ID# CK#				<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
\$310.00
TOTAL (If last page of this schedule)
\$310.00

* 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). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
CONWAY FOR COUNCIL 1

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

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

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.

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*
10-31-03	Plaza Printers 6792 Douglas Ave URBANDALE, IA 50322	POST CARDS FOR MAILING	\$ 246.77
11-3-03	MAIL SERVICES P.O. BOX 5152 DES MOINES, IA 50306	MAILING SERVICES	736.00
10-7-03	SMITH PROMOTIONAL Advertising 1501 42nd STREET WEST DES MOINES, IA 50266	YARD SIGNS	401.27
SUB-TOTAL			\$ 1,384.04
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1,384.04

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

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.