

# DISCLOSURE SUMMARY PAGE

*Scott*

|                                  |                          |
|----------------------------------|--------------------------|
| <b>FORM DR-2</b><br>(Rev. 01/98) | <b>DISCLOSURE REPORT</b> |
| <b>For Office Use Only</b>       |                          |
| Comm. # <u>17377</u>             | Indexed <u>SW</u>        |
| Audited _____                    | Computer <u>NO</u>       |

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

**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

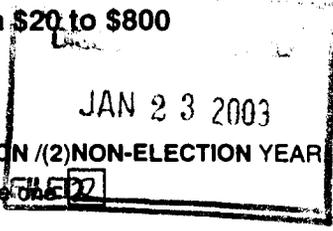
*Jan A. [Signature]* (563) 355 2714  
**SIGNATURE OF TREASURER** (or person filing this report) **TELEPHONE**

1-20-03  
**DATE SIGNED**

**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 1-19-03 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR  
 (report date) Indicate one  1  2



CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

|  |
|--|
| Local Committees, enter Date of Election<br>_____                          |
| County & Local Committees, enter County in which Election is held<br>_____ |

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.) .....\$ 1346<sup>80</sup>

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ..... 265<sup>00</sup>

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.....\$** 1611<sup>80</sup>

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ..... 504<sup>05</sup>

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) .....\$ 1107<sup>75</sup>

**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) .....\$ 2523<sup>58</sup>

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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

*Minard for Supervisor*

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 |
|--------------------------|--|---|--|---------------------|-----------------------------|
| 11/1/02                  | ID#<br>CK#   | Julie E Klindt<br>22220 210 <sup>th</sup><br>Bettendorf, IA 52722         | none                                       | \$ 15 <sup>00</sup> |                             |
| 11/1/02                  | ID#<br>CK#   | Joni Soosholte D. Time<br>12090 W 240 <sup>th</sup><br>Eldridge, IA 52748 | none                                       | 25 <sup>00</sup>    |                             |
| 11/1/02                  | ID# 6125<br>CK# 2077                               | Iowa Realtors PAC<br>1370 NW 114 <sup>th</sup> # 103<br>Clive, IA 50325   | none                                       | 200 <sup>00</sup>   |                             |
| 11/1/02                  | ID#<br>CK#   | Cal Werner<br>25370 E Vukky Dr.<br>Bettendorf, IA 52722                   | none                                       | 25 <sup>00</sup>    |                             |
|                          | ID#<br>CK#   |   |  |                     |                             |

SUB-TOTAL \$ 265<sup>00</sup>

TOTAL (if last page of this schedule) \$ 265<sup>00</sup>

\* 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

**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.

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

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

| 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      |
|---------------------------------------|--|--|--------------------------------|----------------------|
| 10/31/02                              | ID#<br>CK# NA  | QCBT<br>4500 Bundy #100<br>Davenport, IA 52806               | October SC                     | \$ 5 <sup>35</sup>   |
| 10/31/02                              | ID#<br>CK# 1061  | Postmaster US Post Office<br>Davenport, IA 52806             | STAMPS                         | 148 <sup>00</sup>    |
| 10/31/02                              | ID#<br>CK# 1062  | Battleground News<br>Davenport, IA 52806                     | Campaign Advertising           | 220 <sup>00</sup>    |
| 11/30/02                              | ID#<br>CK# NA  | QCBT<br>4500 Bundy #100<br>Davenport, IA 52806               | November SC                    | 5 <sup>25</sup>      |
| 12/11/02                              | ID#<br>CK# 1063  | Linda Creech<br>815 Mt. Vernon Dr.<br>Davenport, IA 52806    | Campaign Supplies              | 30 <sup>00</sup>     |
| 12/16/02                              | ID#<br>CK# 1064  | Cond. Mountain<br>3940 Elmwood Ave.<br>Davenport, IA 52807   | Gift Certificates              | 90 <sup>00</sup>     |
| 12/31/02                              | ID#<br>CK# NA  | QCBT<br>4500 Bundy ST #100<br>Davenport, IA 52806            | December SC                    | 5 <sup>25</sup>      |
|                                       | ID#<br>CK#   |  |                                |                      |
| SUB-TOTAL                             |  |  |                                | \$ 504 <sup>05</sup> |
| TOTAL (if last page of this schedule) |  |  |                                | \$ 504 <sup>05</sup> |

**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 detailed 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<br><b>F</b><br>(Rev. 08/96)                        | <b>LOANS<br/>                 RECEIVED<br/>                 &amp; REPAID</b> |
| <input type="checkbox"/> CHECK THIS BOX IF<br>AMENDING FORM |  |

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

Minard For Supervisor

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

**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD** \$ 2523<sup>58</sup>

**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 \$ 2523<sup>58</sup>

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