

FEB 27 2002
DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>1386</u>	
Indexed <u>9-16-02</u>	
Audited <u>WR5</u>	
Computer _____	

COMMITTEE NAME (Must be same as on Statement of Organization)
M.S. Miller for Senate

IMPORTANT: Indicate type of committee you are reporting for:

(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

Mary Ellen Miller 641-423-2300 26 February 2002
SIGNATURE OF TREASURER (or person filing this report) **TELEPHONE** **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 26 February 2002 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate one

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 <u>March 12, 2002</u>
County & Local Committees, enter County in which Election is held <u>Cerro Gordo/Worth</u>

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).....\$ 2277.00

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.....\$ 2277.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B).....\$ 369.04

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)\$ 1907.96

UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 94.09

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ 1385.11

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
<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)
M.E. Miller for Senate

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
2.8.02	ID# CK#	Mary Louise Streeter 8342 Kahala Dr. Diamondhead MS 39525	Cousin	\$ 35.00	
2.9.02	ID# CK#	Stewart Iverson 3020 Daws-Williams Rd Daws, IA 50071		100.00	
2.9.02	ID# CK#	Unitemized Contributions		77.00	
2.11.02	ID# CK#	Noreen Cayan 208 So Kentucky Ave Mason City, IA 50401		20.00	
2.14.02	ID# CK#	Mary Ellen Miller 803 E. State Street Mason City, IA 50401		500.00	
2.14.02	ID# CK#	Delores Lathrop 19288A 280th St NE Mason City, IA 50401		25.00	
2.14.02	ID# CK#	Edwina Kapal 4 Lakeview Drive Mason City, IA 50401		25.00	
2.14.02	ID# CK#	Charles Grove 5009 12th Avenue S. Clear Lake, IA 50428		100.00	
2.15.02	ID# CK#	Fanchon Wilson 103 S. Connecticut Ave. Mason City, IA 50401		25.00	
2.15.02	ID# CK#	Carol Schmiedes Kamp 46 N. Willowgreen Ct Mason City, IA 50401		50.00	
SUB-TOTAL				\$ 957.00	
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

SCHEDULE A (Rev. 06/97)	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)

M. E. Miller for Senate

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 FUN RAIS INCO
2.15.02	ID# CK#	Colin Robinson 807 Ellis Drive Charles City, IA 50616		\$ 100.00	
2.16.02	ID# CK#	Mary Ellen Orth 310 E. Lake Ventura, IA 50482		100.00	
2.16.02	ID# CK#	JUNE Smythe 2045 Hunters Ridge Dr. Mason City, IA 50401		25.00	
2.18.02	ID# CK#	Marti Rodemaker 225 Pebble Creek Dr. Mason City, IA 50401		100.00	
2.18.02	ID# CK#	Greg Foley 49 Winnebago way Mason City, IA 50401		5.00	
2.18.02	ID# CK#	Lawrence Paul 107 Linden Drive Mason City, IA 50401		50.00	
2.18.02	ID# CK#	Terry Carpenter 12 Sumac Mason City, IA 50401		50.00	
2.18.02	ID# CK#	Dolores Byerly 1725 S. Delaware Mason City, IA 50401		100.00	
2.18.02	ID# CK#	Beverly Lunsman 2357 13th St. SE Mason City, IA 50401		50.00	
2.18.02	ID# CK#	Beatrice Good 11858 Fir Avenue Clear Lake IA 50401		50.00	

SUB-TOTAL

\$ 630

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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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

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
2.18.02	ID# CK#	Douglas Rozendaal 2202 16th Avenue NW Clear Lake, IA 50428		\$ 100.00	
2.18.02	ID# CK#	CB. Prickett, Sr. 1705 So. Coolidge Mason City, IA 50401		10.00	
2.19.02	ID# CK#	Tula Zanos 944 6th St SE Mason City, IA 50401		40.00	
2.18.02	ID# CK#	Donna Urton 128 Parkridge Dr. NW Mason City, Iowa		30.00	
2.18.02	ID# CK#	Roger Berg 56 River Heights Dr Mason City Iowa 50401		200.00	
2.18.02	ID# CK#	Thomas Schaefer 7 Brainerd Ct Mason City, Iowa 50401		200.00	
2.18.02	ID# CK#	Jerry Currie 1712 N. Caroline Ave Mason City, Iowa		50.00	
2.19.02	ID# CK#	Margaret Dodge 17 Winnebagos Ct Mason City, Iowa 50401		10.00	
2.18.02	ID# CK#	Andy Hill 3472 Onitil Ave Marilyn, Iowa		10.00	
2.18.02	ID# CK#	Bob Johnson 3 Fairmeadow Ct Mason City, Iowa		10.00	
SUB-TOTAL				\$ 660.00	
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

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 B (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
M.E. Miller for Senate

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
2.14.02	ID# CK#	Sign Pro 1803 S. Pierce Mason City, IA 50401	Virgil Bernero	\$ 89.04
2.15.02	ID# CK#	Sign Pro "	Sign deposit	20000
2.22.02	ID# CK#	Quest campaign calls	campaign calls	80.00
	ID# CK#			
SUB-TOTAL				\$ 369.04
TOTAL (if last page of this schedule)				\$ 369.04 ✓

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 INSTRUCTIONS, SEE BACK OF FORM

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)
M.E. Miller for Senate

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*
2.06.02 2.13.02 2.18.02	Printing Services Inc 1915 4th St SW Mason City, IA 50401	Copies, stamp, envelopes	\$ 94.09
SUB-TOTAL			\$ 94.09
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 94.09

*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.

