

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1336</u>
Indexed	<u>e</u>
Audited	<u>10-22-03</u>
Computer	<u>WRS</u>

COMMITTEE NAME (Must be same as on Statement of Organization) FEB 25 2002
Amanda Ragan for Iowa Senate H.D.

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 State of Candidates

[Signature] (641) 422-9169 2-24-02
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 2/26/02 special election March 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
Special March 12, 2002
 County & Local Committees, enter County in which Election is held
Cerro Gordo, Worth, Mitchell

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.) \$ 6,198.72

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) s/b 4777.00 4777.00

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 \$ 10,945.72

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) s/b 3990.68 ~~3740.68~~ 3740.68

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) s/b 6985.04 \$ 7205.04

UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 75.16

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ ~~14085.63~~ 14085.63

OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO 0

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

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)

Amanda Page for Iowa 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
1/29/02	ID# CK#	Charles + Nancy Sweetman 9 North Georgia Ave Mason City, IA 50401		\$200.00	
1/29/02	ID# CK#	John Saszewski 1513 9th St SW Mason City IA 50401		5.00	
2/8/02	ID# CK#	Roxanne Conlin 600 Gr. Fin. Bldg 319-7th St, Des Moines IA 50309		500.00	
2/11/02	ID# CK#	Thomas Kelly 116 W. Congress Wora Springs IA 50158		100.00	
2/11/02	ID# CK#	Robert & Veda Perry 106 Shell Rock Dr Northwood, IA 50459		100.00	
2/12/02	ID# CK#	Jan or Ellen VanSabbem 4865 Raven Northwood IA 50459		20.00 100.00	
2/15/02	ID# CK#	Beth McBride 510 5th St SE Mason City IA 50401		20.00	
2/15/02	ID# CK#	John Groninger 1608 W. Carolina Mason City IA 50401		50.00	
2/15/02	ID# CK#	Marilyn Lagos 110 W Jefferson Mason City IA 50401		300.00	
2/18/02	ID# CK# CASH	Dan Haase 829 Carolina Mason City IA 50401		20.00	

SUB-TOTAL

\$ 1315.00

TOTAL (if last page of this schedule)

\$

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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)

Aracanda Rayon for Iowa 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.

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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
2/19/02	ID# CK#	Charlotte Halley 1439 9th SE MASON CITY IA 50601-5006		\$ 25.00	
2/19/02	ID# CK#	Lester & Elaine Pearson 319 S. Rhode Island Mason City IA 50401		20.00	
2/19/02	ID# CK#	Mary Conlin 722 S. Monroe Ct. Mason City IA 50401		25.00	
2/19/02	ID# CK#	Annette Hussey-Balsness 635 S. Tennessee Pl MASON CITY IA 50401		25.00	
2/19/02	ID# CK#	Robert & Kathryn Douglas 78 Kentucky ct MASON CITY IA 50401		25.00	
2/19/02	ID# CK#	Loia Rhein 809 N Federal MASON CITY IA 50401		20.00	
2/19/02	ID# CK#	Mary Clauern 319 6th St SW Apt 3 MASON CITY IA 50401		15.00	
2/19/02	ID# CK#	Kenneth D Scott 11042 Indigo Ave Clear Lake IA 50428		20.00	
2/19/02	ID# CK#	Catherine Beck 15486 300th St Mason City IA 50401		500.00	
2/19/02	ID# CK#	Melvin or Carol Jean Iverson 1505 Limestone ct MASON CITY IA 50401		50.00	
				918 725.	
				SUB-TOTAL	\$ 705
				TOTAL (if last page of this schedule)	\$

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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)
Amanda Ragan for Iowa House 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.

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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
2/19/02	ID# CK#	Willis & Ruby Haddix 2904 N. Carolina Mason City IA 50401		\$ 25.00	
2/19/02	ID# CK#	For Everist 234 6 th St NW Mason City IA 50401		25.00	
2/19/02	ID# CK#	Peggy Smalley 612 E Division Audubon IA 50025		25.00	
2/19/02	ID# CK#	Greg & Linda Steensland 19351 Monument Rd Council Bluffs IA 51503		25.00	
2/19/02	ID# CK#	Patricia Harper 3336 Santa Maria Dr Waterloo, IA 50702-5334		250.00	
2/19/02	ID# CK#	Diane Stone 3127 4 th St Des Moines IA 50313		10.00	
2/19/02	ID# CK#	Maureen Donnelly 949 Dover St Towson City IA 52215		20.00	
2/19/02	ID# CK#	Carolyn Riley 690 Foster Dr Des Moines IA 50312		20.00	
2/19/02	ID# CK#	Susan Pampenin 2718 College Davenport IA 52803		25.00	
2/19/02	ID# CK#	Mary Campos 203 E 16 th St Des Moines IA 50316-3917		15.00	
SUB-TOTAL				\$ 440.00	
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)

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) *Senate*
Amanda Ragan for Iowa House

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
2/19/02	ID# CK#	Alan Bohanan 223 N. Downey PO Box 247 West Branch, IA 52358		\$ 100.00	
2/19/02	ID# CK#	Patricia Marshall 3020 Circle Dr NE Cedar Rapids IA 52407-2409		25.00	
2/19/02	ID# CK#	Richard Machacek 3185 240th St Winthrop IA 50682		25.00	
2/19/02	ID# CK#	Delores Brandt 721 1st Ave NE Delwain IA 50662-1207		25.00	
2/19/02	ID# 9657 CK# 1002	Betty Lou Brim-Hunter 452 Wilmer Ave Des Moines IA 50315		25.00	
✓ 2/19/02	ID# 9657 CK# 1002	DASHI-PAC 424 C St NE Washington, DC 20002		1,000.00	
2/19/02	ID# CK#	Tom Caronte 324 8th St SE Mason City IA 50401		20.00	
2/19/02	ID# CK#	Everett Hutchens 1033 19th St SW Apt 29 Mason City IA 50401-6436		10.00	
2/19/02	ID# CK#	unitemized cash		37.00	
2/21/02	ID# CK# <u>CASH</u>	Vivian Hancock Box 278 Mesaerve IA 50457		10.00	
SUB-TOTAL				\$ 1267	
TOTAL (if last page of this schedule)				\$	

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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) *Senate*
Amanda Raper for Iowa House

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
2/21/02	ID# CK# 2450	John + Diane Martin 635 East State MASON CITY IA 50401		\$ 25.00	
2/21/02	ID# CK#	Maxine F Brinkman 7 woodbine MASON CITY IA 50401		50.00	
2/21/02	ID# CK#	John Zavrios 944 6th St SE MASON CITY IA		50.00	
2/21/02	ID# CK#	Susan Alexander 3709 Carpenter Ave Des Moines IA 50311		100.00	
2/21/02	ID# CK#	Robert Drossky 515 6th Ave Coralville IA 52241		50.00	
2/21/02	ID# CK#	Karen Pearson 203 5th St NW Waverly IA 50677-2419		25.00	
2/21/02	ID# CK#	Kathy Smith 152 7th SW MASON CITY IA 50401		20.00	
2/21/02	ID# CK#	Mrs. Vernon Vandewalker 16 13th St NW MASON CITY IA 50401		25.00	
2/21/02	ID# CK#	Jeffrey + Roxann Newell 225 woodbine MASON CITY IA 50401		20.00	
2/21/02	ID# CK#	Kenneth Zimmerman 1627 7th Place SW MASON CITY IA 50401		20.00	

SUB-TOTAL
 \$ 385.00
 TOTAL (if last page of this schedule)
 \$

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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)
Amanda Rayon for Iowa 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.

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2/21/02	ID# CK#	John Wharum P.O. Box 75 Plymouth IA 50464		\$ 50.00	
2/21/02	ID# CK#	David or Carol Clayton 2170 W State St MASON CITY IA 50401		50.00	
2/21/02	ID# CK#	John & Andrew Holveck 2007 47th Des Moines IA 50310		50.00	
2/21/02	ID# CK#	T. Nicholas Tormey 609 41st St Des Moines IA 50312		25.00	
2/21/02	ID# CK#	Rose Campbell 470 S. Tennessee Pl MASON CITY IA 50401		50.00	
2/21/02	ID# CK#	Johnie Hammond 3431 Ross Road AMES IA 50014		100.00	
2/21/02	ID# CK#	Frances Miller PO Box 287 Ventura IA 50182		100.00	
2/21/02	ID# CK#	R. Bruce & Biane Trimble 1038 Fair Meadow Dr. MASON CITY IA 50401		50.00	
2/21/02	ID# CK#	Liz Austin 1029 15th SE Mason City IA 50401		25.00	
2/21/02	ID# CK#	Jennifer & Karl (Kim) Doughty 7021 275th way Cherry Lake IA 50428		20.00	

SUB-TOTAL

\$520.00

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)

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)
Amanda Ragan for Iowa 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.

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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
2/21/02	ID# CK#	Catherine Freund 843 W 5th St SW Apt 2 Mason City IA 50401		\$10.00	
2/21/02	ID# CK#	Shirley & Richard Dean 14928 Raven Ave Mason City IA 50401		10.00	
2/21/02	ID# CK#	Donella Mae Dill 606 S. 9th St Clear Lake IA 50428		25.00	
2/21/02	ID# CK#	Karen Dole 1413 10th St SW Mason City IA 50401		50.00	
2/21/02	ID# CK#	Walter or Alta Nickerson 13713 Indego Ave Clear Lake IA 50428		20.00	
	ID# CK#				

SUB-TOTAL
 \$ 115.00
 TOTAL (if last page of this schedule)
 \$ 4777.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

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)
Amanda Ragan for Iowa Senate

See
Sch 6

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
2/11/02	ID# CK# 104	Mason City Postoffice 211 N. Delaware Mason City IA 50401	Stamps, 1,000 for mailing	\$ 340.00
2/18/02	ID# CK# 109	Mason City Post office 211 N. Delaware Mason City IA 50401	Bank Mailing	572.02
2/20/02	ID# CK# 110	Rental Furniture & Furniture 1116 5th St SE Mason City IA 50401	Renton copies for election	163.24
2/17/02	ID# CK# 108	James Bevalacqua 125 W Washington Ave #13 Hastotdale, NY 10530	Consultant Fee	2500.00
2/14/02	ID# CK# 105	Zoni Jordan 60 Kenico Rd Apt #9 Therawood, NY 10594	Travel expenses	250.00
2/15/02	ID# CK# 106	Joe Abbey 6 Strawberry St Richmond VA 23228	Paper, pens, paperclips Stamps	133.90
2/15/02	ID# CK# 107	Brian Feinsilber 23606 E Groueland Rd Beechwood OH 44122	Keys, index cards Phone cards	31.52
	ID# CK#			

SUB-TOTAL \$
TOTAL (if last page of this schedule) ~~\$ 1075.26~~
s/b 3990.68 # 3740.68

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).)

SCHEDULE G (Rev. 02/96)	BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

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

Amanda Ragan for Iowa House

PART II- ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)

PART I - NAME AND ADDRESS OF CONSULTANT

Name of Consultant		
<i>James Bevalacqua</i>		
Mailing Address		
<i>125 N Washington Ave #13</i>		
City	State	Zip Code
<i>Hartsdale</i>	<i>NY</i>	<i>10530</i>

CONTRACT PERIOD (MM/DD/YR)	TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE
From <i>2/15/02</i> To <i>2/17/02</i>	<i>Check # 108</i> <i>\$ 2500.00</i>

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
<i>2/14/02</i>	<i>Zoni Gordon 60 Kensico Rd Apt #9 Thornwood, NY 10594</i>	<i>Travel expenses to Iowa</i>	<i>\$ 250.00</i>
<i>2/15/02</i>	<i>Joe Abbey 6 STRAWBERRY ST. RR#1 MON, VA 23220</i>	<i>paper, office supplies, stamps</i>	<i>133.90</i>
<i>2/15/02</i>	<i>Brian Feins: lber 23606 E. Groveland Rd Beachwood, Ohio 44122</i>	<i>Keys, index cards phone cards</i>	<i>31.52</i>
	<i>See Sch B</i>		

ESTIMATES OF PERFORMANCE

*Came to get special election
started (campaign), contract
discarded on 2-17-02*

SUB-TOTAL	\$
TOTAL (If last page of this schedule)	<i>\$ 415.40</i>