

**DISCLOSURE SUMMARY PAGE**

<b>FORM DR-2</b> (Rev. 01/98)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	5064
Indexed	SW
Audited	7-31-03
Computer	CL + WRS

JAN 22 2002

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Iowans for Miller MD

**IMPORTANT:** Indicate type of committee you are reporting for:  1  
 ( 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

Eva Talar 224-9381 1/21/02  
**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 January 22, 2002 REPORT FOR AN/A (1) **ELECTION** / (2) **NON-ELECTION** YEAR.  
 (report date) Indicate one  1

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**

<b>CASH ON HAND</b> at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount <b>MUST</b> 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.)	\$	<u>46,263.12</u> ✓
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A)		<u>84,350.00</u> ✓
Schedule F: Loans Received total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
<b>(Schedule H applies to Candidates' Committees Only)</b>		
<b>SUB-TOTAL.....</b>	\$	<u>130,613.12</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B)		<u>8,597.78</u> ✓
Schedule F: Loan Repayments total (Attach Schedule F)		
<b>CASH ON HAND</b> at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>122,015.34</u>
<b>UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$	
<b>IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$	<u>2,487.00</u> ✓
<b>OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$	
<b>CANDIDATE COMMITTEES ONLY:</b>		
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?) - <u>Not needed</u>		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO 0
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$	

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

**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
✓ 1/5/01	ID# 6396 CK# 1135	Committee For Rural Development 811 S. Oak Iowa Falls, IA 50126		\$ 2,000.00	
2/8/01	ID# CK#	Jim Rasmussen 295 NW 66th Ave Des Moines, IA		2,500.00	
6/11/01	ID# CK#	Ken Fillenwarth Arnolds Park, IA 51331		100.00	
7/25/01	ID# CK# 1364	Kossuth Co. Democrats Algona, IA 50511		150.00	
10/15/01	ID# CK#	Alfredo Parrish 2910 Grand Ave Des Moines IA 50312		1,000.00	
11/20/01	ID# CK#	C. David Hurd 3930 Grand Ave #406 Des Moines IA 50312		1,000.00	
12/13/01	ID# CK#	Glen Norris 6205 Oakwood Hills Dr. Johnston, IA 50131-1962		10,000.00	
12/11/01	ID# CK#	Michael Smith 2015 Nash Dr. Des Moines, IA 50314		250.00	
12/10/01	ID# CK#	Eric Tabor 1614 Thornwood Dr. West Des Moines, IA 50265		500.00	✓
12/10/01	ID# CK#	Jerry Crawford Law Firm 1701 Ruan Center Des Moines, IA 50309		12,500.00	✓
SUB-TOTAL				\$ 30,000.00	✓
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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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12/10/01	ID# CK#	John Forsyth 2433 Jordan Trail West Des Moines, IA 50265		\$ 2,500.00	✓
12/16/01	ID# CK#	Steven Wandro 2501 Grand Ave Des Moines, IA 50312		10,000.00	✓
12/10/01	ID# CK#	Julie Pottorff 1090 45th St. Des Moines, IA 50311		500.00	✓
12/16/01	ID# CK#	Roger Stone 2020 Spoon Creek Ct S.E. Cedar Rapids, IA 52403		2,500.00	✓
11/26/01	ID# CK#	James Tierney P.O. Box 411 Topsham, ME 04086-0411		10,000.00	
11/20/01	ID# CK#	Ronald Daniels 3101 Ingersoll Ave. Des Moines, IA 50312		1,000.00	
11/20/01	ID# CK#	Abe Wolf 1609 S. 43rd West Des Moines, IA 50265		1,000.00	
11/4/01	ID# CK#	Roger Stone 2020 Spoon Creek Ct S.E. Cedar Rapids, IA 50265		50.00	
11/30/01	ID# CK#	Michael Myers 2530 73rd St. Urbandale, IA 50322		1,000.00	
12/28/01	ID# CK#	Donald Stanley 4106 Wallace Lane Des Moines, IA 50310		100.00	
SUB-TOTAL				\$ 28,650.00	
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 <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

*Iowans for Miller*

**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/YY)	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
12/28/01	ID# CK#	Debra Moore 4725 Aurora Ave. Urbandale, IA 50322-1339		\$ 100.00	
12/29/01	ID# CK#	Howard Hagen 1600 Hub Tower Des Moines, IA 50304-3986		500.00	
✓ 12/19/01	ID# 6038 CK# 3-50/310	Verizon Ia. St. 6000 Bort Club 11th Ave. Grinnell, IA 50112		100.00	
12/18/01	ID# CK#	Kurtor Lynette Rasmussen 6846 NW Beaver Dr. Johnston, IA 50131		1,000.00	✓
12/18/01	ID# CK#	John Miller P.O. Box 3267 Des Moines, IA 50316		1,000.00	✓
12/18/01	ID# CK#	Jin Rasmussen 295 NW 66th Ave Des Moines, IA		1,000.00	✓
12/13/01	ID# CK#	Michael Medved 2006 Kings Lane Platts mouth, NE 68048		1,000.00	
12/18/01	ID# CK#	Tom Henderson 6239 N. Winwood Dr. Johnston, IA 50131		1,000.00	✓
12/14/01	ID# CK#	Donald Timmons 8409 NE 54th Ave Altoona, IA 50009		1,000.00	✓
12/14/01	ID# CK#	Robert B. Skinner 102 10th St SE Altoona, IA 50009		1,000.00	✓
SUB-TOTAL				\$ 7,700.00	
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 <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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
12/17/01	ID# CK#	Timothy Mallicoat 1295 Bentwood Ct. Altoona, IA 50009		\$1,000.00	✓
12/27/01	ID# CK#	Brent Appel 1087 180th Ave. Ackworth, IA 50001		10,000.00	✓
12/20/01	ID# CK#	Lee Gaudineer 4520 51st St. Des Moines, IA 50310		500.00	
12/18/01	ID# CK#	Ed Skinner Box 367 Altoona, IA 50009		1,000.00	✓
12/18/01	ID# CK#	Jack Krantz 3700 John Lynde Rd Des Moines, IA 50312		1,000.00	✓
12/28/01	ID# CK#	Bill Peters 2909 Fleur Dr. Des Moines, IA 50311		1,000.00	✓
✓ 12/20/01	ID# 6215 CK# 1043	Iowa Lumberman PAC 1449 41st Pl. Des Moines, IA 50311		500.00	
✓ 12/20/01	ID# 6077 CK# 1555	Iowa Pharmacy PAC 8515 Douglas Des Moines, IA 50322		500.00	
12/20/01	ID# CK#	Kip Pohl 121 E. College Iowa City, IA 52240		2,500.00	✓
	ID# CK#				

SUB-TOTAL \$18,000.00

TOTAL (if last page of this schedule) \$84,350.00

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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>B</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)  
*Iowans for Miller*

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
1/10/01	ID# CK#	Bankers Trust 665 Locust St DSM, IA 50309	Print Out Fee	\$ 1.50
3/7/01	ID# CK# 1156	Kevin McCarthy 1901 55th St DSM, IA 50310	Mileage - Iowa City 10/9/98 - reimb.	83.00
3/15/01	ID# CK# 1158	U.S. Postmaster <del>BRE Permit</del> Main of DSM, IA 50318-9755	BRE Permit	125.00
3/15/01	ID# CK# 1157	U.S. Postmaster Capitol Square P.O. DSM, IA 50343-9448	P.O. Box Rental	80.00
3/7/01	ID# CK# 1152	Tom Miller 213 28th St DSM, IA 50312	Airfare - DLC Meeting 7/15/00 Baltimore	1,846.00
3/2/01	ID# CK# 1155	Tom Miller 213 28th St DSM, IA 50312	Reimb - M. Toage DSM → C.R. 6/22/98 DSM → Dub 7/24/98	126.00
3/7/01	ID# CK# 1153	"	Reimb Lodging - Gore Rally 8/18/00 - Dubuque	77.28
3/7/01	ID# CK# 1154	"	Reimb Lodging - Gore Rally 8/19/00 - Davenport	61.60
SUB-TOTAL				\$ 2,400.38
TOTAL (if last page of this schedule)				\$ <del>2,400.38</del>

**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

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
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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)  
*Iowans for Miller*

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
4/26/01	ID# CK# 1159	Harstad Strategic Research 1111 Utica Circle Boulder, CO 80304	polling	\$1,500.00
5/8/01	ID# CK# 1160	Akin, Gump, Straus 1333 New Hampshire Washington, D.C. 20036	Legal Fees - Campaign Finance RESEARCH	3,965.00
6/18/01	ID# CK# 1161	Iowa Democratic Party 5661 Fleur Des Moines, IA 50321	Contribution - Fundraiser	500.00
7/30/01	ID# CK# 1162	Tom Miller 213 28th St. Des Moines, IA 50312	Reimb. - mileage Dsm → Algona Co Demo. Fundraiser	98.40
6/24/01	ID# CK# 1163	Iowa Democratic Party 5661 Fleur Dr. DSM, IA 50321	Post J-J Fundraiser Expense	144.00
12/28/01	ID# CK# 1164	Eaves, Barduka, Baugh 6400 Uptown Blvd NE Albuquerque, NM 87110	Reverse Entry - check #442 issued to replac corp. contribution never cashed	(50.00)
	ID# CK#	Escheat - State of Iowa	Payment to offset funds due to unavailable creditor	50.00
	ID# CK#		(see above)	

SUB-TOTAL \$ 6,197.40  
TOTAL (if last page of this schedule) \$ 8,547.78

**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).)



**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

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

*Schedule is not  
required*

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

*Iowans for Miller*

**PART I - NAME AND ADDRESS OF CONSULTANT**

Name of Consultant <i>Hearstad Strategic Research LLC</i>		
Mailing Address <i>1111 Utira Circle</i>		
City <i>Boulder</i>	State <i>CO</i>	Zip Code <i>80304</i>

**TOTAL ANTICIPATED  
COMPENSATION FOR  
PERFORMANCE**

CONTRACT PERIOD (MM/DD/YR)

From *4/9/01*

To *4/12/01*

\$ *1,500.00*

**ESTIMATES OF PERFORMANCE**

*Polling*

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**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.)**

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
			\$
	<i>N/A</i>		

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