

# DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 01/2001)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	<u>1404</u>
Indexed	<u>2</u>
Audited	_____
Computer	_____

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Sidney Baker for State Representative Committee

**IMPORTANT:** Indicate type of committee you are reporting for:  ID 1404

( 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 <u>Sidney Baker</u>	Political Party <u>Democratic</u>
Office Sought <u>State Representative</u>	District (if Senate or House) <u>9</u>

**FILED**  
 JUL 18 2002  
 pm 7:17

Alice Espe  
 SIGNATURE OF TREASURER (or person filing this report)      515 532 3689 TELEPHONE      07-16-02 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 July 19 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
County & Local Committees, enter County in which Election is held

## 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.) .....\$ 683.09

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) .....	<u>1,365.00</u>
Schedule F: Loans Received total (Attach Schedule F).....	<u>400.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....	_____

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL.....\$** 2,448.09

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...	<u>1,216.74</u>
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) .....\$ 1,231.35

**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).....	\$ <u>400.00</u>

**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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

Sidney Baker for State Representative Committee

**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
5/16/02	ID# CK#	Elliott Family Marvin Elliott 1415 270th St Webster City, Ia		20.00 \$	
5/28/02	ID# CK#	Lorraine Young 921 1st Ave NE Clarion, Ia 50525		25.00	
5/28/02	ID# CK#	Jean Glascock 1202 Broadway Webster City, Ia 50595		25.00	
5/31/02	ID# CK#	Arnold Cook 601 7th Ave NE Clarion, Ia 50525		15.00	
5/31/02	ID# CK#	Ralph Borel 419 North Main Clarion, Ia 50525		25.00	
6/4/02	ID# CK#	Leonard J. Cramer 403 1st Ave SE Clarion, Ia 50525		100.00	
6/11/02	ID# CK#	Roger Johnson 312 4th Ave NE Belmond, Ia 50421		25.00	
6/11/02	ID# CK#	Steven J. Simonin 415 2nd Ave NE Clarion, Ia 50525		100.00	
6/11/02	ID# CK#	Maxine P. Jensen 725 Cedar Drive Clarion, Ia 50525		20.00	
6/20/02	ID# CK#	Frank H. Sharp 4051 W. Ajo Way Tucson, Az 85746		50.00	

SUB-TOTAL

\$ 405.00

\$

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

<b>SCHEDULE</b> <b>A</b> (Rev. 06/97)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)  
 Sidney Baker for State Representative Committee

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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
6/20/02	ID# CK#	Robert Hudson 918 Moore St Stratford, Ia 50249		\$ 50.00	
6/20/02	ID# CK#	Carolyn Bowman 1507 1st St SW Clarion, Ia 50525		35.00	
6/20/02	ID# CK#	Hamilton County Democrats 809 Lewis Drive Webster City, Ia 50595		150.00	
7/1/02	ID# CK#	Carolyn Etter 106 N. Main St. Clarion, Ia 50525		10.00	
7/1/02	ID# CK#	Lorraine Young 921 1st Ave NE Clarion, Ia 50525		25.00	
7/1/02	ID# CK#	Virgil Umthun 521 SE 10th St Eagle Grove, Ia 50533		35.00	
7/1/02	ID# CK#	Myron Hill, Jr. 2651 O'Brien Ave Clarion, Ia 50525		100.00	
7/1/02	ID# CK#	Irene Poulson 216 3rd St S.E Clarion, Ia 50525		20.00	
7/1/02	ID# CK#	Douglas D. Bailey P. O. Box 1 Webster City, Ia 50595		25.00	
7/10/02	ID# CK#	Bruce E. Kaasa 225 3rd Ave NE Clarion, Ia 50525		75.00	

SUB-TOTAL 525.00  
 \$ 525.00  
 TOTAL (if last page of this schedule) \$ 525.00

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For Instructions, See Back of Form

<b>SCHEDULE</b> <b>A</b> (Rev. 06/97)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)

Sidney Baker for State Representative Committee

**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
7/10/02	ID# CK#	Molly Ketchum 101 Plum St Boone, Ia 50036		\$ 25.00	
7/10/02	ID# CK#	Lavonne Kaasa 225 3rd Ave NE Clarion, Ia 50525		75.00	
7/12/02	ID# CK#	Louise Ammon 2237 Charsley Rd Kingsport, Tn 37660		100.00	
7/12/02	ID# CK#	Jimmie O. Johnson 2412 188th St Clarion, Ia 50525		10.00	
7/12/02	ID# CK#	LeeAnn and John Waltzing 1223 Heginger Drive Belmond, Ia 50421		25.00	
7/12/02	ID# CK#	Donna Robertson P. O. Box 223 Mars Hill, N.C. 28754		200.00	
	ID# CK#				

SUB-TOTAL

\$ 435.00

TOTAL (if last page of this schedule)

\$1,365.00

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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)  
Sidney Baker for State Representative Committee

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
5/16/02	ID# CK#	JT's printery 118 N. Main Clarion, Ia 50525	2 color business cards	31.80 \$
5/28/02	ID# CK#	North Iowa Office Supply 106 North Main Clarion, Ia 50525	ink cartridge, labels	64.64
5/29/02	ID# CK#	Clarion Post Office 115 1st St NE Clarion, Ia 50525	stamps	476.00
5/31/02	ID# CK#	First Citizens Bank 120 1st Ave NW Clarion, Ia 50525	service charge	3.30
6/11/02	ID# CK#	Jt's Printery 118 N. Main Clarion, Ia 50525	letterhead, envelopes	241.44
6/20/02	ID# CK#	Carter Printing 1739 East Grand Ave Des Moines, Ia 50316	stickers, magnetic signs	375.24
6/6/02	ID# CK#	North Iowa Office Supply 106 North Main Clarion, Ia 50525	color ink	21.19
6/30/02	ID# CK#	First Citizens Bank 120 1st Ave NW Clarion, Ia 50525	service charge	3.13
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1,216.74

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

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

Sidney Baker for State Representative Committee

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ \_\_\_\_\_

**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
5/28/02	Dean Fletchall 1614 Kantor Webster City, Ia 50595		\$ 400.00

TOTAL (PART I) \$ 400.00

**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 \$ \_\_\_\_\_

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