

FOR INSTRUCTIONS, SEE BACK OF FORM

### DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 05/2002)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	975
Indexed	
Audited	
Computer	

**COMMITTEE NAME** (Must be same as on Statement of Organization) POLLY BUKTA CAMPAIGN #975

**IMPORTANT:** Indicate type of committee you are reporting for:  1 July 22 2002 pm 7-18

( 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 POLLY BUKTA Political Party DEMOCRAT

Office Sought STATE REPRESENTATIVE District (if Senate or House) HOUSE

Camilla McLuire 563-243-8460 7-18-2002  
 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 JULY 19, 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  
CLINTON

### 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.) .....\$ 3827.82

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... \$1235.00

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.....\$ 5062.82

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ... 2705.18

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) .....\$ 2357.64

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\*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ NONE

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....\$ N/A

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 1,500.00

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?) \_\_\_\_\_ YES  NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ NONE

**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)  
**POLLY BURKA CAMPAIGN #975**

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
5/15/02	ID# CK#	GARY L. HEATH 829 HAWTHORNE WOODS, APT 10 CLINTON IA 52732		\$ 25.00	
5/15/02	ID# CK#	DONALD & JUDY DOUGHTY 1740 S BLUFF BLVD CLINTON IA 52732		25.00	
5/14/02	ID# CK#	JOHN T. BLANG 605 S 7TH ST ELDRIDGE IA 52748-1507		50.00	
5/15/02	ID# 8262 CK# 1776	BRIDGE & IRONWORKERS LOCAL 111 8000 29TH ST. West ROCK ISLAND IL 61201 PAC		250.00	
5/20/02	ID# 9657 CK# 1007	DASH-PAC 424 C ST. NE WASHINGTON DC 20002		500.00	
5/20/02	ID# CK#	JACK & JOAN PRINGLE 712 N 13TH ST CLINTON IA 52732		25.00	
5/31/02	ID# CK#	JOHN L OR MARTHA BONTE 872 14TH AVE NW CLINTON IA 52732		25.00	
7/3/02	ID# CK#	ROBERT J. OSTERHAUS 216 AUSTIN MAQUOKETA IA 52060		50.00	✓
7/3/02	ID# CK#	RICHARD O'LEARY 1005 BRIARCLEFF LN CLINTON IA 52732		50.00	✓
7/3/02	ID# CK#	UNITED/IZED CONTRIBUTIONS		235.00	✓
SUB-TOTAL				\$ 1255.00	
TOTAL (if last page of this schedule)				\$ 1255.00	

\* 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>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)  
**POLLY BUKTA CAMPAIGN #975**

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
4/23/02 CK# 1106	ID# 975 CK#	HOUSE TRUMAN FUND IA DEMOCRATIC PARTY FLUR DR DES MOINES IA 50399	DONATION TO IA DEMOCRATIC PARTY	\$ 2500.00
6/9/02 CK# 1107	ID# CK#	U.S. CELLULAR P.O. BOX 10677 CEDAR RAPIDS IA	CELL PHONE PMT	49.04
6/28/02 CK# 1108	ID# CK#	CLINTON HERALD P.O. BOX 2961 CLINTON IA 52732	ADVERTISEMENT FOR JULY 4TH PICNIC AFTER CLINTON PARADE	107.10
7/5/02 CK# 1109	ID# CK#	U.S. CELLULAR P.O. BOX 10677 CEDAR RAPIDS IA	CELL PHONE PMT	49.04
	ID# CK#			

SUB-TOTAL \$ 2705.18

TOTAL (if last page of this schedule) \$ 2705.18

**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).)

COMMITTEE NAME (Must be same as on Statement of Organization)  
**POLLY BURTA CAMPAIGN #975**

SCHEDULE <b>F</b> (Rev. 02/96)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1500.00

**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 F -- TOTAL LOANS FORGIVEN \$ \_\_\_\_\_

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1500.00

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