

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/2001)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>840</u>	
Indexed _____	
Audited _____	
Computer _____	

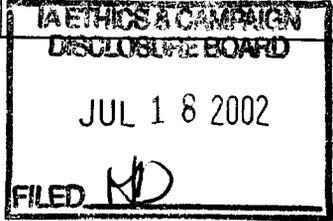
COMMITTEE NAME (Must be same as on Statement of Organization)
DEARDEN FOR STATE SENATE COMMITTEE

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

CANDIDATE COMMITTEES ONLY:

Candidate Name <u>DICK L. DEARDEN</u>	Political Party <u>DEMOCRATIC</u>
Office Sought <u>STATE SENATE</u>	District (if Senate or House) <u>SENATE #</u>



Joanne Wingert
SIGNATURE OF TREASURER (or person filing this report)

(515) 278-1052
TELEPHONE

7-18-02
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 ELECTION YEAR (report date) REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR. 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.)	\$ <u>8972.77</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u> </u>
Schedule F: Loans Received total (Attach Schedule F).....	<u> </u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....	<u> </u>
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL.....	\$ <u>8972.77</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...	<u>5002.00</u>
Schedule F: Loan Repayments total (Attach Schedule F)	<u> </u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$ <u>3970.77</u>

**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).....	\$ _____

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

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)
DEARDEN FOR STATE SENATE 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
6-14-02	ID# CK# 243	IA DEMOCRATIC PARTY 5661 FLEUR DR DES MOINES IA 50321	TROMAN FUND CONTRIBUTION	\$ 5000 ⁰⁰
6-18-02	ID# CK#	U.S. BANK PO BOX 1800 ST PAUL M. NN 55101-0800	SERVICE CHARGE	2 ⁰⁰
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 5002 ⁰⁰

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).)



P.O. Box 1800
 Saint Paul, Minnesota 55101-0800
 02432 TRC 000001 27332SBA1 Y ST01

Business Statement

Account Numbr
 0 000 0011 5
 Statement Peri
 Jun. 3 , 20
 throu
 Jun. 30, 20



DICK L DEARDEN
 D/B/A DEARDEN FOR STATE SENATE COMMITTEE
 4024 42ND ST
 DES MOINES IA 50310-2816



To Contact U.S. Ba

24-Hour Business Solutions: 1-800-673-35

TDD: 1-800-685-50

Internet: www.usbank.c

COMMUNITY CHECKING

Member F

Account Number 0-000-0011-5113
 U.S. Bank National Association

Account Summary

	# Items		
Beginning Balance on Jun. 3		\$	8,972.77
Other Withdrawals	1		2.00-
Checks Paid	1		5,000.00-
Ending Balance on Jun. 30, 2002		\$	3,970.77

Other Withdrawals

Date	Description of Transaction	Ref Number	Amount
Jun. 18	Analysis Service Charge	1800061845	\$ 2.00
Total Other Withdrawals			\$ 2.00

Checks Paid

Check	Date	Ref Number	Amount
0243	Jun. 21	4546347683	5,000.00
Total (1) Checks Paid			\$ 5,000.00

Balance Summary

Date	Ending Balance	Date	Ending Balance
Jun. 18	8,970.77	Jun. 21	3,970.77

Balances only appear for days reflecting change.

Win \$100 a day every day for a year! You'll be automatically entered to win \$36,500 every time you use your U.S. Bank Check Card or any other Visa® check card and sign for your purchases between May 1 and June 30, 2002. Purchases made on the Internet and over the phone count too. Get started today!

Buying a new home or wanting to refinance? Take advantage of our great mortgage loan products and rates! Stop by your local U.S. Bank branch for details.