

DISCLOSURE SUMMARY PAGE

FORM DR-2 DISCLOSURE REPORT (Rev. 01/2001)

For Office Use Only
Comm. # 1365
Indexed
Audited
Computer WRS

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State House
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 Slate of Candidates

CANDIDATE COMMITTEES ONLY:
Candidate Name Ervin A. Dennis Political Party Republican
Office Sought Town House of Representatives # 19 District (if Senate or House)

IA ETHICS COMMISSION DISCLOSURE BOARD
FEB 10 2004
FILED
DATE SIGNED

B. Salvador Dennis SIGNATURE OF TREASURER (or person filing this report)
319-266-8432 TELEPHONE

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 May 29 02 - July 15, 02 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.)	\$	<u>1606.62</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1895.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>2500.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
(Schedule H applies to Candidates' Committees Only)		
	SUB-TOTAL.....\$	<u>6001.62</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>5140.99</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)	\$	<u>860.63</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)\$ 2500.00

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)

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State 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.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions for any commercial purpose by any person other than statutory political committees.

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	+
06-04-02	ID# CK#	Schoof, Sam. 1026 Carriage Ln. Cedar falls, IA 50613		\$ 40.00	
06-04-02	ID# CK# 1486	Dennis, Seth 6904 Old Quarry Ln Austin TX 78731-4120	Son	50.00 5.00	*
06-04-02	ID# CK# 5778	Matnecké Robert F. Linda 3020 Abraham Dr. Cedar falls, IA 50613-6609		15.00	
06-04-02	ID# CK# 1630	Kuehl, Ray 1112 Irving St Cedar falls IA		10.00	
06-04-02	ID# CK# 11067	Van Syoc - Wendall M - Ruth A 915 South Ellen St. Cedar falls IA 50613		10.00	
06-04-02	ID# CK# 6238	Sampson, Jennifer 721 West 8th Cedar Falls IA 50613		10.00	
06-04-02	ID# CK# 2972	Jacobsen, Terrold E. Susan J. 3029 B. Pheasant D Cedar falls IA 50613		25.00	
06-05-02	ID# CK# 2856	Jenkins G. Willard - H. Kay 6 Winter Ridge Rd. Waterloo, IA 50701-1049		100.00	
06-08-02	ID# CK# 9340	Mudd, Sr. James - Cecelia 3949 Beaver Ridge Trail Cedar falls IA 50613		150.00	
06-08-02	ID# CK# 4759	Riggs, Carl B. - Constance 4010 Clearview Dr. Cedar falls, IA 50613		20.00	
SUB-TOTAL				\$ 385.00 \$ 430.-	*

TOTAL (if last page of this schedule) \$ 430.- *

* 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.

DISCLOSURE SUMMARY PAGE

FORM DR-2 DISCLOSURE REPORT (Rev. 01/2001)

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State House

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

For Office Use Only
 Comm. # 1365
 Indexed e
 Audited 11-12-03
 Computer WRS

CANDIDATE COMMITTEES ONLY:

Candidate Name Ervin A. Dennis Political Party Republican
 Office Sought Iowa House of Representative House District (if Senate or House)

FILED JUL 18 2002 PM 7-17

B. LaVada Dennis (319) 266-8432 July 17-02
 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 May 29-02 - July 15-02 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) 7-19-02 Indicate one 1

CHECK IF AMENDMENT TO REPORT DATED _____

Local Committees, enter Date of Election

 County & Local Committees, enter County in which Election is held

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.)

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.) \$ 2431.61

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1850.00

Schedule F: Loans Received total (Attach Schedule F) 2500.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 6781.61

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)... adjust 14 5140.99

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) \$ 1640.62

**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)..... \$ 2500.00

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)

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State 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.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	FI RA INC
05-29-02	ID# CK# 6624	Porter, Darrel J. 5301 Main St. Cedar falls IA 50613		\$ 60.00	
05-29-02	ID# CK# 3069	Michael, Richard A. - Beverly 2628 W. 3rd Cedar falls IA		50.00	
05-29-02	ID# CK# 1302	Euchner, James H. Marion I 3020 Minnetonka Cedar falls IA 50613		20.00	
05-29-02	ID# CK# 3721	Erickson, Richard C. / Non B 1305 Woodrail Ave Columbia Mo 65203		100.00	
05-30-02	ID# CK# 7875	Mozena, Barbara 2320 Royal Dr. Cedar falls IA 50613		10.00	
05-30-02	ID# CK# 6080	Lynch, Richard - Deloros 1309 Catherine Cedar falls IA 50613		25.00	
05-30-02	ID# CK# 9519	Oglesby - Donald J. - Janet L 610 Spruce Onalaska WI 54650 2259		25.00	
06-01-02	ID# CK# 5758	Voldseth, Ed - Elizabeth 1228 Grand Blvd Cedar falls IA 50613		10.00	
06-01-02	ID# CK# 8256	Malm, Fern M. - Donald I 1715 Prury Lane Cedar falls IA		25.00	
06-01-02	ID# CK#	Dennis Seth 6904 Old Quarry Lane Austin, TX 78731	Son	20.00	
SUB-TOTAL				\$ 345.00	
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)

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State House

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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	FINANCIAL
06-04-02	ID# CK#	Schoof, Sam 1026 Carriage Ln. Cedar falls, IA 50613		\$ 40.00	
06-04-02	ID# CK# 1486	Dennis, Seth 6904 Old Quarry Ln Austin TX 78731-4120	Son	5.00	
06-04-02	ID# CK# 5778	Matnecké Robert F. Linda 3020 Abraham Dr. Cedar falls, IA 50613-6609		15.00	
06-04-02	ID# CK# 1630	Kuehl, Ray 1112 Irving St Cedar falls, IA		10.00	
06-04-02	ID# CK# 11067	Van Syoc - Wendall M - Ruth A 915 South Ellen St. Cedar falls IA 50613		10.00	
06-04-02	ID# CK# 6238	Sampson, Jennifer 721 West 8th Cedar falls IA 50613		10.00	
06-04-02	ID# CK# 2972	Jacobsen, Terrold E. Susan J. 3029 B. Pheasant D Cedar falls IA 50613		25.00	
06-05-02	ID# CK# 2856	Jenkins G. Willard - H. Kay 6 Winter Ridge Rd. Waterloo IA 50701-1049		100.00	
06-08-02	ID# CK# 9340	Mudd, Sr. James - Cecelia 3949 Beaver Ridge Trail Cedar falls IA 50613		150.00	
06-08-02	ID# CK# 4759	Riggs, Carl B. - Constance 4010 Clearview Dr. Cedar falls, IA 50613		20.00	
SUB-TOTAL				\$ 385.00	
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 AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Dennis for Iowa State 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	FI RA INC
06-14-02	ID# CK# 5161	Lenth Denny 3032 Wellington Cedar falls IA 50613		\$ 50.00	
06-21-02	ID# CK# 1952	McCutcheon, James A. - Martha 2313 Hawthorne Dr. Cedar falls IA 50613-4703		100.00	
06-21-02	ID# CK# 1842	Thomson, Leland A. 2014 w. 3 rd Cedar falls IA 50613		100.00	
06-21-02	ID# CK# 5445	Hines, Thomas E. Robin S 55 Hemlock Terrace Canton IL 61520		50.00	
06-24-02	ID# CK# 3042	Bolstad, Arne - Karen 1215 River Heights Rd. Menomonie, WI 54751		50.00	
06-27-02	ID# CK# 8772	Booth, James C. Jr. Margö 1211 Greer's Trail Peach tree City GA 30269		50.00	
06-30-02	ID# CK# 13563	Miller, L.M. 808 Old Chisholm Trail Dewey, AZ 86327		100.00	
07-10-02	ID# CK# 2843	Haack, Joel K. Linda L. 1821 Winter Ridge Rd. Cedar falls IA 50613-4775		20.00	
07-10-02	ID# CK# 2393	Diemer, Marvin E. 806 Westwood Dr. Cedar falls 50613-1746		100.00	
07-10-02	ID# 6027 CK# 1953	Deere, Pac Iowa #6027 666 Grand Ave. Suite 1707 Des Moines IA 50309-2507		500.00	

SUB-TOTAL \$ 1120
TOTAL (if last page of this schedule) \$ 1850.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURE
<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)
Dennis for Iowa State House

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
05-30-02	ID# CK# 1038	Postmaster, Waterloo Iowa	Postage	\$ 46.40
06-03-02	ID# CK# 1039	Vision Development 1508 Starbeck Circle Cedar falls IA	Radio Spots TV Spots	1630.00
06-03-02	ID# CK# 1040	BH County Elections Office Waterloo, IA 5043	Voter lists	3.00
06-03-02	ID# CK# 1041	Postmaster Cedar Falls IA 50613	Stamps	34.00
06-07-02	ID# CK# 1042	Vision Development 1508 Starbeck Circle Cedar falls IA	Newspaper Ads Consulting Services	\$ 3025.70
07-01-02	ID# CK# 1043	Postmaster Cedar falls, IA	Stamps	37.00
07-02-02	ID# CK# 1044	BH County Election Office Waterloo IA 50901	Voter lists	69.00
07-08-02	ID# CK# 1045	Dutchers Paint Main Street Cedar falls IA	Paint sticks for Hand held fans	67.95
SUB-TOTAL				\$ 4913.10
TOTAL (if last page of this schedule)				\$

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 (Rev. 09/97)	MONETARY EXPENDITURE
<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)
Dennis for Iowa State House

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
07-09-02	ID# CK# 1046	BH County Election Office Waterloo, IA 50701	Voter lists	\$ 41.00
07-14-02	ID# CK# 1047	Ervin Dennis 1034 w. 15th Cedar falls	Purchased Toner from Iowa Business Machines	64.79
7-14-02	ID# CK# 1048	FRS Industries Bo Box 2128 Fargo, ND. 58107	Black Ink	5.61
7-14-02	ID# CK# 1049	Ace Hardware 703 East 18th Cedar falls, IA	Glue Sticks	11.75
7-14-02	ID# CK# 1050	Parkade Printer 315 Main St. Cedar falls, IA	1000 #9 Envelopes	76.29
7-14-02	ID# CK# 1051	Congdon Printing 115 E. Second St. Cedar falls	White paper	23.15
7-14-02	ID# CK# 1052	Ervin A. Dennis 1034 w. 15th Cedar falls IA	Sample fan	5.30
	ID# CK#			
SUB-TOTAL				\$ 227.89
TOTAL (if last page of this schedule)				\$ 5140.99

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 F (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)
Dennis for Iowa State House

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.)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
06-05-02	Dennis, Ervin-LaVoda 1034 W. 15th Cedar falls, IA.	candidate	\$ 2,500

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL (PART I) \$ 2,500.00

TOTAL CASH REPAYMENTS (PART II) \$ _____
 From Schedule E - TOTAL LOANS FORGIVEN \$ _____
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 2500.00

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