

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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

COMMITTEE NAME (Must be same as on Statement of Organization)
 Matthews for State Representative JUL 16 2002

IMPORTANT: Indicate type of committee you are reporting for: 1 PM 7-15

(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 State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name <u>Shane Matthews</u>	Political Party <u>Democrat</u>
Office Sought HOUSE <u>Iowa House</u>	District (if Senate or House) <u>50</u>

(515)386-2310 7/15/02
 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 July 19 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.
 (report date) 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.)\$ 392.65

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>1025.00</u>
Schedule F: Loans Received total (Attach Schedule F).....	<u>178.30</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....	<u>0.00</u>

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 1595.95

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...	<u>154.00</u>
Schedule F: Loan Repayments total (Attach Schedule F)	<u>0.00</u>

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$ 1441.95

**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$ 31.82 <u>31.82</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ <u>0.00</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$ <u>678.30</u>

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 0.00

For Instructions, See Back of Form

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<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)
Matthews for State Representative

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
05/15/02	ID# CK#	Zola M. Fields Paton, IA 50217		\$ 25.00	
06/13/02	ID# CK#	Edmund L. Gose 979 240th Street Jefferson, IA 50129		50.00	
05/18/02	ID# CK#	Mary F. Erdley 1061 Monitor Ct. Greenwood, IN 46143	Mother-in-Law	100.00	
06/14/02	ID# CK#	C. Dean Smalley Box 187 Paton, IA 50217		10.00	
06/14/02	ID# CK#	Joyce Hiler 3007 Lamoni Avenue Rockwell City, IA 50579		10.00	
06/15/02	ID# CK#	Lois J. Clark 620 South Chestnut Jefferson, IA 50129		20.00	
06/15/02	ID# CK#	Jonathon Smith 409 North Chestnut Jefferson, IA 50129		100.00	
06/20/02	ID# CK#	Robert Meinking 312 S 21ST Street Fort Dodge, IA 50501		100.00	
06/24/02	ID# CK#	M. Joyce Christensen 603 N Woodlawn Avenue Lake City, IA 51449		35.00	
06/25/02	ID# CK#	Beulah Brody Churdan, IA 50050		20.00	
SUB-TOTAL				\$ 470.00	
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

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
<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) Matthews for State Representative

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
06/26/02	ID# CK#	Bobbee Lindstrom 1893 N. Twin Lakes Road Manson, IA 50563		\$ 50.00	
06/27/02	ID# CK#	Agnes Concannon 902 Head Street Box 235 Churdan, IA 50050		100.00	
06/28/02	ID# CK#	Alberta L. Hamilton 400 East Monroe Jefferson, IA 50129		10.00	
06/29/02	ID# CK#	Paul Fields 3536 380th Street Farnhamville, IA 50538		20.00	
06/30/02	ID# CK#	Dorothy E. Higgins 601 School Street Box 46 Churdan, IA 50050		25.00	
06/30/02	ID# CK#	Richard Brunner 508 South Wilson Jefferson, IA 50129		100.00	
06/30/02	ID# CK#	Joyce Ausberger 987 P Avenue Jefferson, IA 50129		100.00	
07/02/02	ID# CK#	Connie Ryan P.O. Box 113 Churdan, IA 50050		100.00	
07/03/02	ID# CK#	Ruth Feldmann 8 Park Place Jefferson, IA 50129		50.00	
	ID# CK#				
SUB-TOTAL				\$ 555.00	
TOTAL (if last page of this schedule)				\$ 1025.00	

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COMMITTEE NAME(Must be same as on Statement of Organization)
 Matthews for State Representative

SCHEDULE F (Rev. 08/96)	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 \$ 500.00

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.)

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
05/15/02	Shane Scott Matthews 524 South Park Street Paton, IA 50217	Candidate	\$ 178.30

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) \$ 178.30

TOTAL CASH REPAYMENTS (PART II) \$ 0.00
 From Schedule E -- TOTAL LOANS FORGIVEN \$ 0.00
TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 678.30

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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 (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
 Matthews for State Representative

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
	ID# CK# 104	Voided check sent to Iowa Ethics and Campaign Disclosure Board		\$
06/14/02	ID# CK# 105	Bee & Herald Publishing 214 North Wilson Box 440 Jefferson, IA 50129	18" Vote Matthews Ad	117.00
07/02/02	ID# CK# 106	Calhoun County Journal-Herald P.O. Box 40 Manson, IA 50563	Thank you Voters ad	20.00
07/02/02	ID# CK# 107	Dayton Review 24 E. Skillet Box 6 Dayton, IA 50217	Thank you Voter ad	17.00
	ID# CK#			
SUB-TOTAL				\$ 154.00
TOTAL (if last page of this schedule)				\$ 154.00

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).)

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SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Matthews for State Representative

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
06/12/02	Lake City Graphic & Calhoun County Advocate 103 N. Center P.O. Box 121 Lake City, IA 51449	Display-Thank you	\$ 14.40
06/12/02	Central Iowa Publishing Inc. P.O. Box 130 Bayard, IA 50029	Display-Thank you	10.00
06/13/02	Bee & Herald Publishing 214 North Wilson P.O. Box 440 Jefferson, IA 50129	Display-Thank you	7.42
SUB-TOTAL			\$ 31.82
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 31.82

*If actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:
 *Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.