

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 03/2003)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # <u>1331</u>	Logged In <u>CS</u>
Scanned	Computer <u>WKS</u>

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

CITIZENS FOR GORMAN

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 State of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name <u>STEVEN F. GORMAN</u>	Political Party <u>Dem.</u>
Office Sought <u>IOWA HOUSE</u>	District (if Senate or House) <u>98</u>

IOWA STATE CAMPAIGN DISCLOSURE BOARD  
 APR 2 2003  
 FILED

SIGNATURE OF TREASURER (or person filing this report) Steven F. Gorman

TELEPHONE (712) 323-1536

DATE SIGNED 1-08-03

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 1-21-03 REPORT FOR ANA (1) ELECTION ((2)NON-ELECTION YEAR.  
(report date)

Indicate one  1

CHECK IF AMENDMENT TO REPORT DATED 5-20-02

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.) ..... \$ 537.39

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below) ..... 1380.00

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 ..... \$ 1917.39

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ... 545.77

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) ..... \$ 1371.62

\*\*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) ..... \$

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

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

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/YY)	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
4/30/02	ID# CK# CASH	Campaign Kick off Fundraiser	PASS THE HAT	\$ 40.00	✓
	ID# CK#				
	ID# CK#	(1-21-03 Amendment 5-20-02 TOTAL)		1340.00	
SUB-TOTAL				\$ 40.00	
TOTAL (if last page of this schedule)				\$1380.00	

\* 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

**DISCLOSURE SUMMARY PAGE**

Reset Form

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

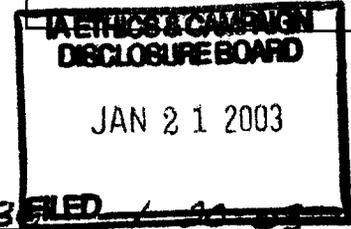
**IMPORTANT:** Indicate type of committee you are reporting for:  1  
 ( 1 ) Statewide/Legislative Candidate ( 2 ) Statewide PAC ( 3 ) State Party ( 4 ) County/Local Candidate  
 ( 5 ) County PAC ( 6 ) Ballot Issue/Franchise Committee ( 7 ) County/City Central Committee  
 ( 8 ) Support State of Candidates

**CANDIDATE COMMITTEES ONLY:**

Candidate Name: STEVEN F. GORMAN Political Party: DEM  
 Office Sought: HOUSE OF REP. District (if Senate or House): 98

**FORM DR-2**  
 (Rev. 01/2003) **DISCLOSURE REPORT**

**For Office Use Only**  
 Comm. # 1331  
 Indexed 5  
 Audited \_\_\_\_\_  
 Computer WRS



Steven F. Gorman  
 SIGNATURE OF TREASURER (or person filing this report)

(712) 323-1531  
 TELEPHONE

1-21-03  
 DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

**SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**

I AM FILING A 1-21-03 REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR.  
 (report date) Indicate one  1

CHECK IF AMENDMENT TO REPORT DATED 5-20-02

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.) ..... \$ 602.39

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below) ..... 1340.00

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** .... \$ 1942.39

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ..... 545.77

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) ..... \$ 1396.62

\*\*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) ..... \$ \_\_\_\_\_

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)  YES  NO

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

130f24

FOR INSTRUCTIONS, SEE BACK OF FORM

### DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1331</u>
Indexed	<u>e</u>
Audited	
Computer	<u>WRS</u>

\$

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

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 State of Candidates

Thomas O. Boyer 712-322-8508  
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

May 19, 2002  
DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

**SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**

MAY 20 2002

I AM FILING A 5 20 02 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate one  (1)  (2)

- CHECK IF AMENDMENT TO REPORT DATED See amended summary
- 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>502.89</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A)		<u>1,340.00</u>
Schedule F: Loans Received total (Attach Schedule F)		_____
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		_____
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL.....	\$	<u>1,842.89</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B)		<u>720.77</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>1,122.12</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>0</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
<b>CANDIDATE COMMITTEES ONLY:</b>		
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 RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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
✓ April 30 2002	ID# 6060 CK# 2059	IOWA Federation of Labor 2000 WALKER ST. SUITE A DES MOINES IA 50317-5280		\$ 200.00	✓
April 30 2002	ID# CK# 4096	Denise Putman 61 Cottner C.B. IA 51503		25.00	
April 30 2002	ID# CK# 3553	Jean Hartwell 19806 290th ST. McClelland IA 51548		50.00	✓
4-30-02	ID# CK# 3036	Aug Steensland 19351 Monument RD. C.B. IA 51503		25.00	✓
4-30-02	ID# CK# 2266	Chris Sorensen 58 Cottner DR. C.B. IA 51503		25.00	✓
4-30-02	ID# CK# 1351	Teresa Gerjevic 218 S. 3RD ST C.B. IA 51503	sister	30.00	✓
4-30-02	ID# CK# 6995	Jim GORMAN 218 SO. 3RD ST. C.B. IA 51503	FATHER.	50.00	✓
4-30-02	ID# CK# 4065	Russ Lett 1020 N 26th ST. C.B. IA 51501		15.00	✓
4-30-02	ID# CK# 1435	DAVE Phillips 15 UCLID AVE C.B. IA 51503		25.00	✓
4-30-02	ID# CK# 4102	Dave Northman 157 CORRINE C.B. IA 51503		50.00	✓
SUB-TOTAL				\$ 495.00	
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 <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)  
**CITIZENS FOR GORMAN**

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	✓ IF FOR FUND-RAISER INCOME
5-15-02	ID# CK# 9148	Sybil EVANS 211 FRANK ST. CB, IA. 51503		\$ 25.00	
5-15-02	ID# CK# 6592	SUSAN MOONEY 2425 McPHERSON CB, IA. 51503		25.00	
5-15-02	ID# CK# 2185	Sheila RYAN 27063-246th St Underwood, IA 51576		50.00	
5-15-02	ID# CK# 10946	Rod Cameron 3 Summit Circle CB, IA. 51503		25.00	
5-15-02	ID# CK# 5318	Michael HANLON 21762 Eastman Rd. Glenwood, IA 51534		50.00	
4-18-02	ID# CK#	STEVE + DARIA Lewis 177 Honey Suckle RO. CB, IA. 51503		25.00	
4-18-02	ID# CK#	RON MURRAY Mynster Spring Rd CB, IA. 51503		50.00	
4-18-02	ID# CK#	DAN MERRIAM 605 Carter St. Shelby IA 51570		50.00	
4-30-02	ID# CK# 1442	RANDALL Schroeder 601 Roosevelt Ave. CB, IA. 51503		25.00	
4-30-02	ID# CK# 2010	Al WEGMAN 20968 McPHERSON AVE. CB, IA. 51503		25.00	✓
SUB-TOTAL				\$ 350.00	
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 <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)  
**CITIZENS FOR GORMAN**

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/YYR)	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
4-30-02	ID# CK# 12598	JEROME Deiker 50227 US-Highway 75 CB, IA 51503		\$ 50.00	✓
4-30-02	ID# CK# 1745	Joseph Fennell 23098 Three Bridge Rd. CB IA 51503		25.00	✓
4-30-02	ID# CK# 13588	IRENE Dodder 216 Cloverdale Dr. CB IA 51503		25.00	✓
4-30-02	ID# CK# 5602	JOHN Blasingame PO Box 69 SILVER CITY IA 51571		30.00	✓
4-30-02	ID# CK# 4419	John Shorey 1415 Longview Loop CB IA 51503		25.00	✓
4-30-02	ID# CK#	Cash from fundraiser UNITEMized		40.00	✓
4-18-02	ID# CK#	STEVEN GORMAN 19865 ELMA LN COUNCIL BLUFFS IA 51503	Candidate	300.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
SUB-TOTAL				\$ 495	
TOTAL (if last page of this schedule)				\$ 1340	

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FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
**CITIZENS FOR GORMAN**

*duplicate*

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-14-02	ID# CK# 1020	FRANCIS BOGARD 303 Willow Ave Council Bluffs, IA 51503	Reimburse for mailing costs	\$ 14.10
<del>12-30-01</del>	<del>ID# CK# 1017</del>	<del>mail Solutions 4010 South 133<sup>rd</sup> St Omaha, NE 68137 Ste 104</del>	<del>mailing brochures</del>	<del>\$ 175.00</del>
4-30-02	ID# CK# 1018	United Printing 1309 N. Rialto Hwy Omaha, NE 68132	printing stationery	\$ 95.85
4-12-02	ID# CK# 1071	Office Max 505 East 30 <sup>th</sup> Ave Omaha, NE	office supplies	\$ 85.77
4-18-02	ID# CK# 1072	COPYCAT 225 W. Broadway CB, IA 51503	copy costs	24.16
4-19-02	ID# CK# 1073	U.S. Post Office Council Bluffs, IA 51503	mailing + postage for fundraiser	204.00
4-29-02	ID# CK# 1074	Office Max 505 East 30 <sup>th</sup> Ave CB, IA 51503	office supplies	\$ 15.13
4-29-02	ID# CK# 1075	Pizza King 1101 N. Broadway CB, IA 51503	food for fundraiser	106.76
SUB-TOTAL				\$ 720.77
TOTAL (if last page of this schedule)				\$ 720.77
<i>31B 545.77</i>				

**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).)



225 West Broadway  
Council Bluffs, IA 51503  
FAX: (712) 323-1442

TELECOPIER TRANSMISSION SERVICE  
COVER LETTER

IF REPLYING, PLEASE REFER TO  
OUR FILE NO. \_\_\_\_\_

DATE: MAY 20, 2002

TIME: 11:45 AM

This cover letter and following 5 pages are to be sent TO: \_\_\_\_\_

NAME: \_\_\_\_\_ COMMENT: \_\_\_\_\_

FIRM: \_\_\_\_\_

FAX: \_\_\_\_\_

FROM:

NAME: CITIZENS FOR GERMAN ID#1331

FIRM: \_\_\_\_\_

PHONE: \_\_\_\_\_



If you have any problems receiving his telecopy, please contact our FAX operator at (712) 323-1710.  
Thank you.