

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/2001)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1421
Indexed	2
Audited	
Computer	WRS

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT SALLY HART

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

JUN 28 2002
PM 6:27

CANDIDATE COMMITTEES ONLY:

Candidate Name: SALLY HART Political Party: Democrat

Office Sought: HOUSE OF REPRESENTATIVES District (if Senate or House): 75

[Signature] 641 673-7589 6-27-02
 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 19, 2002 REPORT FOR AN (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>0</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	\$	<u>3,365.00</u>
Schedule F: Loans Received total (Attach Schedule F)	\$	<u>S/B 25.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	\$	<u>0</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>3,744.94</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	\$	<u>-103.90</u>
Schedule F: Loan Repayments total (Attach Schedule F)	\$	<u>S/B -0-</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>S/B 3,551.39</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>S/B 265.29</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>31.25</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>S/B -0-</u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0</u>

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 IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT SALLY HART

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
3/8/02	ID# CK#	ANN MORRIS 215 Sheriff Ave. OSKALOOSA, IOWA 52577	N/A	\$ 50.00	
3/12/02	ID# CK#	CINDY DROST 2175 180 ^E Street OSKALOOSA, IOWA 52577	N/A	25.00	
3/16/02	ID# CK#	DON A SMITH 1420 SUMMER STREET GRINNELL, IOWA 50112	N/A	250.00	
3/19/02	ID# CK#	MIKE HANNA 1117 TENTH AVE. E OSKALOOSA, IOWA 52577	N/A	25.00	
3/19/02	ID# CK#	MARGARET STOLTZFUS 1214 ¹ SOUTH 2 ND STREET OSKALOOSA, IOWA 52577	N/A	200.00	
3/19/02	ID# CK#	Randall C HART D.O. 502 NORTH 7 TH Street OSKALOOSA, IOWA 52577	SPOUSE	2,500.00	
3/19/02	ID# CK#	UNIDENTIFIED CONTRIBUTIONS	N/A	15.00	
3/20/02	ID# CK#	Anita + David Meinert 2292 267 ^E Street OSKALOOSA, IOWA 52577	N/A	50.00	
3/25/02	ID# CK#	William Akason 1210 J Ave East OSKALOOSA, IOWA 52577	N/A	250.00	
	ID# CK#				

SUB-TOTAL
\$3365.00
TOTAL (if last page of this schedule)
\$3365.00 ✓

* 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

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
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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.

CHECK THIS BOX IF AMENDING FORM

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

Committee to Elect Sally Hart

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
3/26/02	ID# CK#	Deluxe checks P.O. Box 1186 Lancaster, Ca. 93584	checks	\$ 14.25
4/18/02	ID# CK#	Bill Akason 1210 J Ave E Oskaloosa, Ia 52577	reimburse ment for - town for postage	89.65
	ID# CK#			

SUB-TOTAL \$ 103.90

TOTAL (if last page of this schedule) \$ 103.90

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 & REPAYED
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
COMMITTEE TO ELECT SALLY HART

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0

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
	SALLY HART 502 NORTH 7 th ST OSKALOOSA, IOWA 52577	CANDIDATE	\$ 25.00
Various	SALLY HART (see above)	candidate	190.57
Various	Bill Akason 1210 J Ave E OSKALOOSA, Iowa 52577	N/A s/b	164.37 74.72

TOTAL (PART I) \$ 379.94

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 REPAYED
4/18/02	Bill Akason 1210 J Ave E OskaLoosa, Iowa 52577	N/A See Sch B	\$ 89.65
s/b Debt			

^{See Sch B} s/b
TOTAL CASH REPAYMENTS (PART II) - \$ 89.65

From Schedule E -- TOTAL LOANS FORGIVEN \$ 25.00
s/b Debt
TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 265.29

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