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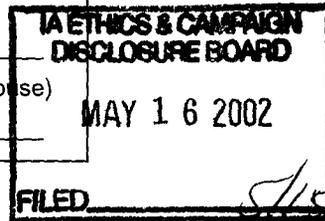
FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/2001) DISCLOSURE REPORT For Office Use Only Comm. # 9154 Indexed SW Audited Computer

COMMITTEE NAME (Must be same as on Statement of Organization) Effective Government Committee IMPORTANT: Indicate type of committee you are reporting for: 2 (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 Political Party Office Sought District (if Senate or House)



SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE 319-354-8402

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/A (1) ELECTION/(2) NON-ELECTION YEAR. Indicate one 2

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

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$1,351.64), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: \$9,000.00, Schedule F: \$0.00, Schedule H: \$0.00), SUB-TOTAL (\$10,351.64), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: \$9,910.00, Schedule F: \$0.00), CASH ON HAND at the end of this reporting period (\$910.70), \*\*UNPAID BILLS (\$0.00), \*\*IN KIND CONTRIBUTIONS (\$0.00), \*\*OUTSTANDING LOANS (\$0.00), CANDIDATE COMMITTEES ONLY, CONSULTANT BREAKDOWN, VALUE OF CAMPAIGN PROPERTY.

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)  
Effective Government Committee

**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
4/25/02	ID# CK#	Jack Valenti 1600 Eye Street NW Washington, DC 20006	N/A	\$ 1,000.00	
1/15/02	ID# CK#	Fred Eychaner 1645 West Fullerton Chicago, IL 60614	N/A	\$ 4,000.00	
5/10/02	ID# CK#	Pamela Anagnos Liapakis 515 East 79th Street, 14th Floor New York, NY 10021	N/A	\$ 4,000.00	
	ID# CK#				
SUB-TOTAL				\$ 9,000.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 9,000.00	

\* 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

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

<b>SCHEDULE</b> <b>B</b> (Rev. 09/97)	<b>MONETARY</b> <b>EXPENDITURES</b>
<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)  
 Effective Government 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
1/15/02	ID# 1320 CK# 1003	Reeder for State Representative 701 Buchanan Street Manchester, IA 52057	Contribution.	\$ 2,500.00
2/22/02	ID# 1336 CK# 1004	Ragan for Iowa Senate 810 12th Street NW Mason City, IA 50401	Contribution.	\$2,500.00
4/25/02	ID# 1434 CK# 1005	Committee to Elect John Whitaker RR 1 Box 53 Hillsboro, IA 52603	Contribution.	\$1,000.00
5/10/02	ID# 9098 CK# 1006	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321	Contribution.	\$3,910.70
	ID# CK#			

SUB-TOTAL \$ 9,910.70

**TOTAL (if last page of this schedule)** \$ 9,910.70

**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).)