

DISCLOSURE SUMMARY PAGE

MAY 21 2002

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>955</u>	
Indexed _____	
Audited _____	
Computer _____	

COMMITTEE NAME (Must be same as on Statement of Organization)
Marshall County Republican Women

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

Lehman Jesina 641-473-1076
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

5/19/02
 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 14, 2002 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.) \$ 2336.42

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 1539.31

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..... \$ 3875.73

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 777.85

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) \$ 3097.88

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 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)
Marshall Co. Republican Women

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
2/1/02	ID# CK#	unitemized		\$155.00	
2/8/02	ID# CK#	Sheryl Leadout 411 N. 9 th St. Marshalltown IA 50158		25.00	
2/8/02	ID# CK#	unitemized		90.00	
2/15/02	ID# CK#	Augusta Petrone 1608 W. Main Marshalltown IA 50158		20.00	
2/15/02	ID# CK#	unitemized		135.00	
2/22/02	ID# CK#	unitemized		243.00	
2/22/02	ID# CK#	May Schendel 902 W. Main Marshalltown IA 50158		20.00	
3/18/02	ID# CK#	Elizabeth Morell 2039 Durham Ave State Center IA 50247		20.00	
3/18/02	ID# CK#	unitemized		141.31	
3/29/02	ID# CK#	unitemized		105.00	

SUB-TOTAL
 \$ 954.31
 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 IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Marshall Co. Republican Women

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4/1/02	ID# CK#	unitemized		\$50.00	
4/16/02	ID# CK#	unitemized		100.00	
4/16/02	ID# CK#	Cindy Halstead 1533 Reed Ave Marshalltown IA 50158		40.00	
4/16/02	ID# CK#	Cindy Mack 204 Highland Acres Rd Marshalltown IA 50158		40.00	
4/16/02	ID# CK#	Greg Nichols 2012 Wardview Marshalltown IA 50158		40.00	
4/16/02	ID# CK#	Clair Long 2450 233 rd St Marshalltown IA 50158		40.00	
4/16/02	ID# CK#	Bill Bestmann 1914 Knollway Marshalltown IA 50158		40.00	
4/16/02	ID# CK#	Jan Sipe 1704 Olson Way Marshalltown IA 50158		20.00	
4/16/02	ID# CK#	Jeff Heil 3024 Oaks Ave Haverhill IA 50120		40.00	
4/16/02	ID# CK#	LeAnn Jesina 1624 C Ave Gladbrook IA 50635		20.00	

SUB-TOTAL

\$430.00

TOTAL (if last page of this schedule)

\$

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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)
Marshall Co. Republican Women

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4/16/02	ID# CK#	unitemized		\$ 20.00	
4/16/02	ID# CK#	unitemized		45.00	
4/30/02	ID# CK#	unitemized		40.00	
	ID# CK#	check to Barbara Grassley never cashed		50.00	
	ID# CK#	unitemized			
	ID# CK#				

SUB-TOTAL \$ 155.00

TOTAL (if last page of this schedule) \$ 1539.31

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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.

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Marshall Co. Republican Women

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
2/8/02	ID# CK# 1005	Mailee Nichols 2012 Wardview Marshalltown IA 50158	postage & misc	\$ 113.85
2/8/02	ID# CK# 1006	Mailee Nichols 2012 Wardview Marshalltown IA 50158	printer cartridge	34.00
2/9/02	ID# CK# 1007	4th District Rep. Women 24 E Main Waukon IA 52172	yearly fee	30.00
3/18/02	ID# CK# 1008	Fisher Comm. Ctr. 701 S. Center Marshalltown IA 50158	room rental	5.00
3/30/02	ID# CK# 1009	Central IA Fairgrounds E Olive Marshalltown IA 50158	rental	25.00
4/1/02	ID# CK# 1010	Iowa Fed of Rep Women 821 Forest Hill Dr. Coralville IA 52241	76 members @ \$7	532.00
4/1/02	ID# CK# 1011	4th District Rep Women 24 E Main Waukon IA 52172	76 members @ .50	38.00
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 777.85

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).)