

OCT 28 2002

DISCLOSURE SUMMARY PAGE

pm 10-25

FORM <b>DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1412
Indexed	
Audited	
Computer	WRS

COMMITTEE NAME (Must be same as on Statement of Organization)  
Susan Conroy for Representative

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

Margaret House 641-622-2031 10-25-02  
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 15, 2002 - Oct 14, 2002 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate one  1

CHECK IF AMENDMENT TO REPORT DATED 10-18-02

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.) .....\$ 12280.95

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)..... 9532.00

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.....\$ 21812.95

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)..... 13692.90

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) .....\$ 8120.05

UNPAID BILLS (From Schedule D - Attach Schedule D) .....\$ \_\_\_\_\_

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ 6318.68

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) \$ \_\_\_\_\_

0304 7990 0002 3928 7339

FOR INSTRUCTIONS, SEE BACK OF FORM

OCT 21 2002

pm 10-18

DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1418
Indexed	SW
Audited	
Computer	WRS

COMMITTEE NAME (Must be same as on Statement of Organization)  
Susan Conroy for Representative

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

Deputy House 641-622-2031 10-18-02  
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 15, 2002 - Oct 14, 2002 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.  
(report date) Indicate one  1

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.) .....\$ 12280.95

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)..... 9532.00

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.....\$ 21812.95

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) ..... 13692.90

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) .....\$ 8120.05

UNPAID BILLS (From Schedule D - Attach Schedule D) .....\$ \_\_\_\_\_

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....\$ 1825.58

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 type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Susan Conroy for 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/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
7-19-02	ID# CK#	Carlton McCord 298 W. Pine Marengo IA 52301		\$ 60.00	✓
7-29-02	ID# CK#	Lores Hochstetler 3264 260th St. Williamsburg IA 52361		40.00	✓
8-2-02	ID# CK#	Dorothy Thomas <del>418</del> 210 E South St, APT 1 Sigourney IA 52591		20.00	✓
8-2-02	ID# CK#	Doris Conner 304 E. Ringgold St Sigourney IA 52591		25.00	✓
8-2-02	ID# CK#	Mary G. Agnew 2545 H. AVE. Williamsburg, IA 52361		20.00	✓
8-3-02	ID# CK#	Victorine Malloy 3065 F-52 Trail Parnell IA 52350		20.00	✓
✓ 8-3-02	ID# 6084 CK# 598	IOWA STATE UAW - PAC Committee 2700 S River Rd, Suite 200 Des Plaines IL 60018		300.00	
✓ 8-3-02	ID# 6113 CK# 2671	AFSCME/IOWA COUNCIL 61 4320 N.W. 2nd Ave. Des Moines IA 50013		250.00	
✓ 8-3-02	ID# 6046 CK# 3459	JUSTICE FOR ALL PAC 6046 218 6TH AVE Suite 526 Des Moines, IA 50309-4091		500.00	
8-5-02	ID# CK#	James A. Conroy 707 E. Pleasant Valley Sigourney IA 52591	Spouse	200.00	
SUB-TOTAL				\$ 1435.00	
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)

*Susan Conroy for 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/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
8-8-02	ID# CK#	Linda Dittert P.O. Bx 48 Middle Amana, IA 52307		\$ 60.00	
8-5-02	ID# CK#	Solveig Moore 401 Wilson Williamsburg IA 52361		40.00	
8-8-02	ID# CK#	Kay Schwenke 404 E Pleasant Valley Sigourney IA 52591		40.00	
8-5-02	ID# CK#	Suzanne Moffit 2878 315 <sup>th</sup> St. North English, IA 52316		40.00	
8-8-02	ID# 6073 CK# 474	Iowa Medical PAC 1001 Grand Ave Des Moines, IA 50265		250.00	
8-14-02	ID# CK#	Pridipongse Vithespongse 614 W. Skillman Sigourney IA 52591		30.00	
8-17-02	ID# CK#	Suzanne Moffit 2878 315 <sup>th</sup> St. North English, IA 52316		30.00	
8-17-02	ID# CK#	Dorothy Thomas 210 E. South St. Apt 1 Sigourney IA 52591		20.00	
8-20-02	ID# CK#	Bill Kuntz 20607 231st St. Sigourney IA 52591		20.00	
8-17-02	ID# CK#	Unitemized contributions		92.00	✓

SUB-TOTAL

\$ 622.00

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)  
*Susan Conroy for 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/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
8-1-02	ID# CK#	Helen Marget 315 S. Jefferson St Sigourney IA 52591		\$ 20.00	
8-2-02	ID# CK#	Gini Garnett 125 Ives St South English, IA 52335		20.00	
8-27-02	ID# CK#	Unitemized contributions		66.00	✓
8-28-02	ID# CK#	Frances Baumert 17624 210 <sup>TH</sup> St. Sigourney IA 52591		40.00	
8-30-02	ID# 8026 CK# 5278	I. B. E. W. - C. O. P. E. 1125 15 <sup>TH</sup> ST. N.W. Washington, D.C. 20005		100.00	
9-3-02	ID# CK#	<del>Norman R. Nielsen</del> Norman R. Nielsen 5757 Kirkwood Blvd. SW Cedar Rapids IA 52403		50.00	
9-3-02	ID# CK#	Unitemized contributions		46.00	✓
9-6-02	ID# CK#	Stephane Hauptert 1621 Zephyr Ave What Cheer, IA 50268		20.00	
9-9-02	ID# Verified statement attached. CK# 5387	HOUSE PAC HOUSEHOLD INTL INC 1730 K ST. NW SUITE 1106 WASHINGTON D.C. 20006		200.00	
9-12-02	ID# CK#	Dennis G. Newell 3280 Kirby Ave Oskaloosa IA 52577		40.00	
SUB-TOTAL				\$ 602.00	
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)

*Susan Conroy for 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/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
9-3-02	ID# CK#	June Rice 402 E. 3rd St Delta, IA 52550		\$ 50.00	
9-14-02	ID# 6086 CK# 12788	ISEA - PAC 777 3rd St. Des Moines IA 50309		500.00	
9-14-02	ID# CK#	Leda McAdams 10409 Hwy 92 Delta, IA 52550		50.00	
9-14-02	ID# CK#	unitemized contributions		92.00	✓
9-16-02	ID# CK#	Ray Schwenke 404 E Pleasant Valley Sigourney IA 52591		40.00	
9-17-02	ID# CK#	Craig H. Neilsen 8620 Tilleist Circle Las Vegas NV 89117		200.00	
9-18-02	ID# CK#	Margie M. Garcia 724 Forest Drive Council Bluffs IA 51503		50.00	
9-21-02	ID# CK#	Ricky GERARD 3903 G. St. Amana, IA 52203		100.00	
9-21-02	ID# CK#	Linda Dittert P.O. Bx 48 Middle Amana, IA 52307		25.00	
9-21-02	ID# CK#	Marie L. Stumpff P.O. Bx 145 Amana IA 52203		50.00	
SUB-TOTAL				\$ 1157.00	
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)

*Susan Conroy for 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
9-21-02	ID# CK#	Unitemized contributions		\$ 26.00	✓
✓ 9-23-02	ID# 6237 CK# 1492	ABATEPAC 3118 Eastern Ave NE Cedar Rapids IA 52402		250.00	
✓ 9-27-02	ID# 6070 CK# 2676	Iowa LawPAC 521 East Locust St. Fl. 3rd Des Moines IA 50309		1000.00	
9-28-02	ID# CK#	Robert E. Uhlmann Bx 747 Williamsburg IA 52361		50.00	
10-1-02	ID# CK#	Judith Campbell 19882 Hwy 149 Hedrick IA 52563		35.00	
✓ 10-4-02	ID# 6073 CK# 495	IMPAC 1001 Grand Ave West Des Moines IA 50265		100.00	
✓ 10-4-02	ID# 6046 CK# 3541	Justice For ALL PAC 218 Sixth Ave, Suite 526 Des Moines IA 50309		750.00	
✓ 10-7-02	ID# 8153 CK# 1348	21st Century Democrats 1311 L St. NW Suite 300 Washington DC 20005		750.00	
10-7-02	ID# CK#	Linda Goeldner 4038 Kingman Blvd. Des Moines IA 50311		50.00	
9-27-02	ID# CK#	Shafer Law Office 204 W. State St Williamsburg IA 52361		50.00	
SUB-TOTAL				\$ 3061	
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)  
*Susan Conroy for 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/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
✓ 10-10-02	ID# 8253 CK# unnumbered	Local Union 25 PAC FUND (Plumbers & Pipefitters) 4600 46TH AVE ROCK ISLAND IL 61201		\$ 500.00	
10-11-02	ID# CK#	Roxanne Conlin 319 7th St. Des Moines IA 50309		200.00	
10-11-02	ID# CK#	Erin Nelson 2321 N. 55th St Omaha NE 68104		120.00	
✓ 10-13-02	ID# 6046 CK# 3585	Justice for All PAC 218 6TH AVE Suite 526 Des Moines IA 50309		500.00	
10-13-02	ID# CK#	Barbara Lee Boatwright 2331 East 39th Court Des Moines, IA 50317		100.00	
10-13-02	ID# CK#	Ruth W. Swenson 2102 Kildee St. Ames IA 50014		50.00	
10-13-02	ID# CK#	Susan Terry Knapp 1610 Burr Oaks Dr 50266 West Des Moines IA 50266		50.00	
10-13-02	ID# CK#	Shirley K. McAdon 1305 S. 15th Adel IA 50003		100.00	
10-13-02	ID# CK#	Susan E. Ryan-Anderson 3219 Beaver Des Moines IA 50310		25.00	
10-13-02	ID# CK#	Martha Anderson 937 37th St. Des Moines IA 50312		50.00	
SUB-TOTAL				\$ 1695	
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)  
*Susan Conroy for 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
10-13-02	ID# CK#	<i>Elaine Szymoniak 2116 44th St Des Moines, IA 50310</i>		\$ 25.00	
10-13-02	ID# CK#	<i>Mary Jo Johnson 1707 Clark AMES, IA 50010</i>		20.00	
10-13-02	ID# CK#	<i>Doris Jean Newlin 3315 48th Pl. Des Moines, IA 50310</i>		100.00	
10-13-02	ID# CK#	<i>Victoria L. Herring 4331 Greenwood Dr. Suite 100 Des Moines, IA 50312</i>		50.00	
10-13-02	ID# CK#	<i>Helen Marget 315 S. Jefferson Sigourney IA 52591</i>		100.00	
10-14-02	ID# CK#	<i>Unitemized Contributions</i>		665.00	
	ID# CK#				

SUB-TOTAL \$ 960

TOTAL (if last page of this schedule) \$ 9532

\* 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**

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>B</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)  
*Susan Conroy for 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
07-21-02	ID# CK#	<i>Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591</i>	<i>Reimbursement for supplies</i>	<i>\$ 36.34</i>
07-23-02	ID# CK#	<i>Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591</i>	<i>Reimbursement for supplies.</i>	<i>133.50</i>
08-06-02	ID# CK#	<i>OLD CREAMERY THEATRE AMANA, IA 52203</i>	<i>TICKETS FOR FUND RAISER</i>	<i>370.00</i>
08-12-02	ID# CK#	<i>MPL Williamsburg, IA 52361</i>	<i>Thank you advertisement</i>	<i>31.50</i>
08-12-02	ID# CK#	<i>What Cheer paper What Cheer, IA 50268</i>	<i>Thank you advertisement</i>	<i>27.00</i>
08-12-02	ID# CK#	<i>News Review SIGOURNEY, IA 52591</i>	<i>Thank you advertisement</i>	<i>36.80</i>
08-13-02	ID# CK#	<i>Pella Art 832 Main St Pella, IA 50219</i>	<i>Rural sign art work.</i>	<i>25.00</i>
08-15-02	ID# CK#	<i>Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591</i>	<i>Reimbursement gas</i>	<i>39.92</i>
SUB-TOTAL				<i>\$ 700.06</i>
TOTAL (if last page of this schedule)				<i>\$</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).)

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>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
--------------------------------------	--------------------------

CHECK THIS BOX IF AMENDING FORM

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

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
08-15-02	ID# CK#	Keith Goodman P.O. Bx 183 SIGOURNEY, IA 52591	Reimbursement: paper	\$ 14.84
08-21-02	ID# CK#	Carter Printing 1739 E. Grand Ave Des Moines, IA 50316	50 SIGNS	1988.56
09-11-02	ID# CK#	U.S. POSTAL SERVICE SIGOURNEY IA, 52591	POSTAGE BULK MAIL	60.80
✓ 09-11-02	ID# CK#	IA DEMOCRATIC PARTY 5661 Fleur Dr. Des Moines, IA 50321	CONTRIBUTION	8000.00
09-18-02	ID# CK#	Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591	Reimbursement: gas, paper cutting	83.68
09-18-02	ID# CK#	U.S. POSTAL SERVICE SIGOURNEY IA 52591	POSTAGE Bulk Mail	56.54
09-23-02	ID# CK#	U.S. POSTAL SERVICE SIGOURNEY IA 52591	POST CARDS	230.00
09-29-02	ID# CK#	Carter Printing 1739 E. Grand Ave Des Moines, IA 50316	Yard signs	877.15
SUB-TOTAL				\$ 11311.57
TOTAL (if last page of this schedule)				\$

**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).)

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>B</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)  
*Susan Conroy for 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
09-29-02	ID# CK#	<i>Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591</i>	<i>Reimbursement postage and disks</i>	<i>\$ 116.84</i>
09-30-02	ID# CK#	<i>MPC 100 W. MAIN ST MARENGO IA 52301</i>	<i>advertising</i>	<i>31.50</i>
10-02-02	ID# CK#	<i>U.S. Postal Service SIGOURNEY IA 52591</i>	<i>POSTAGE STAMPS</i>	<i>97.00</i>
10-03-02	ID# CK#	<i>U.S. POSTAL SERVICE SIGOURNEY IA 52591</i>	<i>POSTAGE STAMPS AND EXPRESS MAIL POSTAGE</i>	<i>197.65</i>
10-04-02	ID# CK#	<i>U.S. POSTAL SERVICE SIGOURNEY IA 52591</i>	<i>POST CARDS</i>	<i>138.00</i>
✓ 10-04-02	ID# CK#	<i>TRUMAN FUND 5661 Fleur Dr Des Moines IA 50321</i>	<i>CONTRIBUTION</i>	<i>750.00</i>
10-07-02	ID# CK#	<i>U.S. POSTAL SERVICE SIGOURNEY IA 52591</i>	<i>POSTAGE STAMPS</i>	<i>37.00</i>
10-11-02	ID# CK#	<i>SIGOURNEY NEWS REVIEW SIGOURNEY IA 52591</i>	<i>POLITICAL ADVERTISEMENT</i>	<i>65.70</i>
SUB-TOTAL				<i>\$ 1433.69</i>
TOTAL (if last page of this schedule)				<i>\$</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).)

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>B</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)  
*Susan Conroy for 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
10-11-02	ID# CK#	MPC 100 W. MAIN MARENGO IA 52301	POLITICAL ADVERTISEMENT	\$ 133.20
10-14-02	ID# CK#	RICHLAND PLAINSMAN- CLARION RICHLAND IA 525	POLITICAL ADVERTISEMENT	39.06
10-14-02	ID# CK#	What Cheer Paper P.O. Bx 414 What Cheer, IA 50268	POLITICAL ADVERTISEMENT	27.00
08-15-02	ID# CK#	HARLAND CHECKS 40 KEOKUK CO STATE BANK SIGOURNEY IA 52591	PRINTED CHECKS	18.32
10-03-02	ID# CK#	KEOKUK CO. STATE BANK P.O. Bx 207 SIGOURNEY IA 52591	RETURNED CHECK 25.00 + 5.00 FEE CHARGED TO ACCOUNT	30.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 247.58
TOTAL (if last page of this schedule)				\$ 13692.90

**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).)

OCT 28 2002

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Susan Conroy for Representative

SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
08-07-02	ISEA - PAC # 6086 777 Third St Des Moines IA 50309		DISKETTE	\$ 100.00	
09-13-02	New American OPTIMISTS P.O. Bx 2068 (PAC # 9665) Raleigh NC 27602		Printing & shipping literature	1621.21	
08-31-02	Stephanie Hauptert 1621 Zephyr Ave. What Cheer IA 50268		FOOD	62.37	✓
09-26-02	Carol Roemis-Heusinkveld 4209 H Street Amana IA 52203		advertising	42.00	
✓ 10-04-02	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321		Production and Postage DIRECT MAIL	4493.10	

SUB-TOTAL \$ ~~1875.58~~ 6318.68  
 TOTAL (if last page of this schedule) \$ ~~1875.58~~ 6318.68

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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

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

Susan Conroy for Representative

SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

See amended schedule

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
✓ 08-07-02	ISEA - PAC # 6086 777 Third St Des Moines IA 50309		DISKETTE	\$ 100.00	
✓ 09-13-02	New American OPTIMISTS P.O. Bx 2068 (PAC # 9665) Raleigh NC 27602		Printing & shipping literature	1621.21	
08-31-02	Stephanie Haupt 1621 Zephyr Ave. What Cheer IA 50268		FOOD	62.37	✓
09-26-02	Carol Roemis-Heusinkveld 4209 H Street Amana IA 52203		advertising	42.00	

SUB-TOTAL \$ 1825.58  
 TOTAL (if last page of this schedule) \$ 1825.58

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.