

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 07/2003)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1391
Logged In	
Scanned	
Computer	
Audited	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Firman for House

**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>Firman for House</u>	Political Party _____
Office Sought _____	District (if Senate or House) _____

Linda DiMarco 319-268-1242 11/13/03  
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE 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 \_\_\_\_\_ REPORT FOR ANVA (1) ELECTION (2) NON-ELECTION YEAR.

(report date)  
Indicate one

Filed 10-22-02

CHECK IF AMENDMENT TO REPORT DATED August 14, 2002

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

<b>CASH ON HAND</b> at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount <b>MUST</b> 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>4412.47</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) .....		<u>200.00</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>		
<b>SUB-TOTAL</b> .....	\$	<u>4612.47</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....		<u>1757.02</u>
Schedule F: Loan Repayments total (Attach Schedule F) .....		_____
<b>CASH ON HAND</b> at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) .....	\$	<u>2855.45</u>
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D) .....		
	\$	_____
<b>**IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....		
	\$	_____
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F) .....		
	\$	_____
<b>CANDIDATE COMMITTEES ONLY:</b>		
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)		<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$	_____

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	1391
Indexed	SW 2
Audited	10-29-03
Computer	WRS

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

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

*See Amended Summary*

Lyda DiMarco 319-268-1242  
 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 Oct 14 10-14-02 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) *Oct 22 2002 pm 10-21* 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.) .....\$ 4406.20

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A)..... 200.00

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.....\$ 4606.20

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B)..... 1757.02

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) .....\$ 2849.18

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)

<b>SCHEDULE 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)**  
Firman for House

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
2002 8/27	ID# CK#	Donna Murray 615 Wilshire Watertown, IA 50701		\$ 100.00	
9/27	ID# CK#	Theresa Wells Tolle 5797 Treasure Ln Grant, FL 32949		100.00	
	ID# CK#				
SUB-TOTAL				\$ 200.00	
TOTAL (if last page of this schedule)				\$ 200.00	

\* 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)  
 Firman for House

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
6/21/02	ID# CK#	Coopers Smith 1690 NW 131st St Clive, IA 50325	Design of Advertising Materials	\$ 878.25
5/30/02	ID# CK#	Postmaster Waverly, IA 50677	Postage	34.00
7/12/02	ID# CK#	Coopers Smith 1690 NW 131st St Clive, IA 50325	Design + Produce Postcards	498.75
7/12/02	ID# CK#	Gary Jones 323 W 2nd St Cedar Falls, IA 50613	Attorney Fees *S/B phone bank expense	25.50
7/12/02	ID# CK#	Gale Benschel Trapp Pecklers 2321 Cedar Heights Ln Cedar Falls, IA 50613	Phone Bank exp.	84.00
10/12/02	ID# CK#	Steve Firman 11 River Ridge Rd Cedar Falls, IA 50613	Milage for 2 trips to Des Moines	236.52
	ID# CK#			
	ID# CK#			

\* per letter (e-mail) 11-4-03

SUB-TOTAL \$ 1757.02

TOTAL (if last page of this schedule) \$ 1757.02

**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).)