

**DISCLOSURE SUMMARY PAGE**

OCT 16 2002

|                                  |                   |
|----------------------------------|-------------------|
| <b>FORM DR-2</b><br>(Rev. 01/98) | DISCLOSURE REPORT |
| <b>For Office Use Only</b>       |                   |
| Comm. #                          | 1425              |
| Indexed                          |                   |
| Audited                          |                   |
| Computer                         |                   |

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Hougestraat for Senate #1425 <sup>PM 10-15</sup>

**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

Tom B. Hougestraat 319-346-1917 10-14-02  
 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 7-15-10-14 <sup>10-19-02</sup> REPORT FOR AN/A  **ELECTION** /  **NON-ELECTION YEAR.**  
 (report date) Indicate one

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.) .....\$ 9.94

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A)..... 16.50

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.....\$** 26.44

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B)..... 26.44

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) .....\$ .00

**UNPAID BILLS** (From Schedule D - Attach Schedule D) .....\$ .00

**IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E).....\$ .00

**OUTSTANDING LOANS** (From Schedule F - Attach Schedule F).....\$ .00

**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</b><br><b>A</b><br>(Rev. 06/97)              | <b>MONETARY</b><br><b>RECEIPTS</b> |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM |                                    |

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
*Hoogstraet for Senate # 1425*

**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 88B.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 |
|----------------------------------------------|----------------------------------------------------|-------------------------------------------------------------------|--------------------------------------------|-----------------|---------------------------|
| <i>08/09/02</i>                              | ID#<br>CK#                                         | <i>Tom Hoogstraet<br/>805- Florence<br/>Parkersburg Ia. 50465</i> | <i>candidate</i>                           | <i>\$ 15.00</i> |                           |
| <i>07/23/02</i>                              | ID#<br>CK#                                         | <i>Tom Hoogstraet<br/>805- Florence<br/>Parkersburg Ia. 50465</i> | <i>candidate</i>                           | <i>1.50</i>     |                           |
|                                              | ID#<br>CK#                                         |                                                                   |                                            |                 |                           |
| <b>SUB-TOTAL</b>                             |                                                    |                                                                   |                                            | <i>\$16.50</i>  |                           |
| <b>TOTAL (if last page of this schedule)</b> |                                                    |                                                                   |                                            | <i>\$ 16.50</i> |                           |

\* 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<br><b>B</b><br>(Rev. 09/97)                        | MONETARY<br>EXPENDITURES |
| <input type="checkbox"/> CHECK THIS BOX IF<br>AMENDING FORM |                          |

**COMMITTEE NAME** (Must be same as on Statement of Organization) #  
*Hoogestraat for Senate 1425*

| 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 |
|----------------------------------------------|----------------------------------------------------------|--------------------------------------------------------------|--------------------------------|-----------------|
| <i>07/22/02</i>                              | ID#<br>CK#                                               | <i>Lincoln Saving Bank<br/>Aplington Ia.</i>                 | <i>Service charge</i>          | <i>\$ 5.78</i>  |
| <i>08/24/02</i>                              | ID#<br>CK#                                               | <i>Lincoln Saving Bank<br/>Aplington, Iowa</i>               | <i>Service charge</i>          | <i>5.78</i>     |
| <i>08/08/02</i>                              | ID#<br>CK#                                               | <i>Summer Gazette<br/>Summer Iowa</i>                        | <i>Newspaper ad</i>            | <i>9.10</i>     |
| <i>09/23/02</i>                              | ID#<br>CK#                                               | <i>Lincoln Savings Bank<br/>Aplington Iowa.</i>              | <i>Service charge</i>          | <i>5.78</i>     |
|                                              | ID#<br>CK#                                               |                                                              |                                |                 |
| SUB-TOTAL                                    |                                                          |                                                              |                                | \$              |
| <b>TOTAL (if last page of this schedule)</b> |                                                          |                                                              |                                | <b>\$ 26.44</b> |

**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).)

# LINCOLN SAVINGS BANK

PHONE (319) 345-6441 / 1-800-588-7551  
 24 HOUR TELEPHONE BANKING 1-888-508-4572  
 www.lincolnsavingsbank.com

DON'T FORGET, THE SHAZAMCHEK DEBIT  
 CARD PAYS YOU CASH BACK WHEN USED  
 FOR VISA-AFFILIATED PURCHASES. CALL  
 YOUR LSB OFFICE FOR MORE DETAILS!

TOM B HOOGESTRAAT  
 HOOGESTRAAT FOR SENATE  
 PO BOX 218  
 PARKERSBURG IA 50665

STATEMENT PERIOD  
 LAST ENDING  
 8/26/02 9/23/02

PAGE 1

SS# 480 64 1013

OCT 16 2002

| ACCOUNT NUMBER | PREVIOUS BALANCE | --- CREDITS ---<br>COUNT | --- DEBITS ---<br>COUNT | AMOUNT | TOTAL FEE | PRESENT BALANCE |
|----------------|------------------|--------------------------|-------------------------|--------|-----------|-----------------|
| DDA 400084897  | 4.28             |                          | 2                       | 5.78   | 5.78      | 1.50-           |

| CHECK NUMBER | DATE | AMOUNT    | TRANSACTIONS<br>CHECK NUMBER | DATE | AMOUNT | DATE | BALANCE |
|--------------|------|-----------|------------------------------|------|--------|------|---------|
| CHECKING     |      | 400084897 |                              |      |        |      |         |
|              |      |           | DAYS IN THIS CYCLE           |      |        | 28   |         |
|              |      |           | AVG. COLLECTED BALANCE       |      |        | 4.28 |         |

\*\*\*\*\* CHECKS \*\*\*\*\*

|                       |      |         |  |  |  |      |       |
|-----------------------|------|---------|--|--|--|------|-------|
| MAINTENANCE FEE       | 9/23 | 5.50 SC |  |  |  | 9/23 | 1.50- |
| IOWA SALES TAX ON S/C | 9/23 | .28 SC  |  |  |  |      |       |

\*\*\*\*\* DEPOSITS \*\*\*\*\*

# Notice of Dissolution

|                                           |              |
|-------------------------------------------|--------------|
| FORM                                      | (Rev. 07/02) |
| <b>DR-3<br/>NOTICE OF<br/>DISSOLUTION</b> |              |
| <b>For Office Use Only</b>                |              |
| Comm. #                                   | 1425         |
| Indexed                                   | _____        |
| Audited                                   | _____        |
| Computer                                  | _____        |
| Certified Date of Dissolution             | _____        |

## COMMITTEE NAME

|                            |              |
|----------------------------|--------------|
| Hoogestraat for Senate     |              |
| Official Name of Committee |              |
| 805 Florence               | P.O. Box 237 |
| Street                     |              |
| Parkersburg Iowa           | 50665-0237   |
| City, State, Zip Code      |              |
| (319)                      | 346-1917     |
| Area<br>Code               | Telephone    |

OCT 16 2002  
PM 10-15

### WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. All campaign funds have been spent;
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Tom B. Hoogestraat  
Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

10-15-02  
Date Signed

**FOR INSTRUCTIONS, SEE BACK OF FORM**  
**This form is not applicable to statutory political committees.**