

DISCLOSURE SUMMARY PAGE

OCT 18 2002

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	711
Indexed	SW
Audited	
Computer	

COMMITTEE NAME (Must be same as on Statement of Organization) pm 10-16
KLEMME FOR STATE 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

[Signature] 712-546-6667 10/15/02
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 OCTOBER 19, 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.)\$ 5,397.47

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 2,519.38

Schedule F: Loans Received total (Attach Schedule F)00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 7,916.85

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 4,706.24

Schedule F: Loan Repayments total (Attach Schedule F)00

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$ 3,210.61

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) \$.00

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)
KLEMME FOR STATE 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
8/1/02	ID# 6323 CK# 2675	MASTER BUILDERS OF IOWA 221 PARK ST, PO BOX 695 DES MOINES IA 50303		\$ 100.00	
8/9/02	ID# INTEREST CK# EARNED ON ACCOUNT	AMERICAN BANK 234 5TH AVE SW LE MARS IA 51031		6.61	
8/21/02	ID# SEE CK# ATTACHED 4377	DU PONT GOOD GOVERNMENT FUND 1007 MARKET ST, ROOM D-11078 WILMINGTON DE 19898		150.00	
8/23/02	ID# 6059 CK# 2219	IOWA COMMITTEE OF AUTO RETAILERS 1111 OFFICE PARK RD WEST DES MOINES IA 50265		100.00	
8/27/02	ID# 6004 CK# 3931	ASSOC. GENERAL CONTRACTORS OF IA 701 E. COURT AVE STE B, BOX 757 DES MOINES IA 50303		500.00	
9/4/02	ID# 6396 CK# 1171	COMMITTEE FOR RURAL DEVELOPMENT 811 S. OAK ST IOWA FALLS IA 50126		200.00	
9/4/02	ID# 6116 CK# 1018	POLITICAL ACTION COMM. IA DEALERS PO BOX 65840 WEST DES MOINES IA 50265		100.00	
9/4/02	ID# 6069 CK# 1959	IOWA INDUSTRY POLITICAL ACTION COMM. 904 WALNUT STE 100 DES MOINES IA 50309-3503		200.00	
9/10/02	ID# INTEREST CK# EARNED ON ACCOUNT	AMERICAN BANK 234 5TH AVE SW LE MARS IA 51031		6.64	
9/10/02	ID# 6234 CK# 3751	IFBF POLITICAL ACTION COMM. 5400 UNIVERSITY AVE WEST DES MOINES, IA 50266-5997		100.00	
SUB-TOTAL				\$ 1,463.25	
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.

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)
 KLEMM FOR STATE REPRESENTATIVE

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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
9/10/02	ID# 6062 CK# 1372	ISCPA IA SOCIETY OF CPA'S 950 OFFICE PARK RD STE 300 WEST DES MOINES IA 50265-2548		\$ 100.00	
9/26/02	ID# 6064 CK# 1728	IOWA F.O.R.E. FRIENDS OF RURAL ELEC. 8525 DOUGLAS AVE STE 48 DES MOINES IA 50322		100.00	
9/26/02	ID# CK# 7681	CONNIE DE BOOM 430 LINN ST CRAIG IA 51031		250.00	
10/3/02	ID# 6067 CK# 2860	IA HEALTH PAC 6750 WESTOWN PARKWAY #100 WEST DES MOINES IA 50266		100.00	
10/3/02	ID# 6063 CK# 1515	IOWA DENTAL ASSN 505 5TH AVE STE 333 DES MOINES IA 50309-2379		100.00	
10/8/02	ID# 6082 CK# 780	EFFECTIVE GOVERNMENT COMMITTEE MID AMERICAN ENERTY, PO BOX 657 666 GRAND, DES MOINES IA 50303		200.00	
10/10/02	ID# 6155 CK# 003998	TAXPAYERS UNITED PO BOX 209 MUSCATINE IA 52761-0069		200.00	
10/10/02	ID# INTEREST CK# EARNED ON ACCOUNT	AMERICAN BANK 234 5TH AVE SW LE MARS IA 51031		6.13	
	ID# CK#				
	ID# CK#				
SUB-TOTAL				\$ 1,056.13	
TOTAL (if last page of this schedule)				\$2,519.38	

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IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD
 514 EAST LOCUST, SUITE 104
 DES MOINES, IA 50309-1912

18 2002

Form	VERIFIED STATEMENT REGISTRATION (Out-of-State Committees) (Rev. 6/00)
For office use only	
Comm. #	_____
Indexed	_____
Audited	_____
Checked	_____
Computer	_____

VERIFIED STATEMENT REGISTRATION
(Out-of-State Committee)

COMMITTEES NOT ORGANIZED IN IOWA TO COMPLETE IN DUPLICATE.
 SEND ORIGINAL COPY TO THE BOARD AND
 ONE COPY WITH EACH CONTRIBUTION TO THE IOWA COMMITTEE.
 PLEASE REFER TO DETAILED INSTRUCTIONS ON BACK OF FORM.

COMMITTEE NAME

Official Name of Out-of-State Committee (Do not abbreviate committee name. Written explanation must be provided for Acronym.) DuPont Good Government Fund			
1007 Market Street, Room D-11078		Mailing Address	
City, State, Zip Code	Area Code	Telephone No.	
Wilmington, DE 19898	(302)	773-6307	

TREASURER

Name of Treasurer Marc A. Legere, DuPont Finance	
Mailing Address 1007 Market Street, Room B-4405	
City, State, Zip Code	Telephone
Wilmington, DE 19898	(302) 773-3286

OTHER OFFICERS (Attach second page if needed)

Name of Chairperson Stacey J. Mobley, DuPont Legal	
Mailing Address 1007 Market Street, Room D-7038	
City, State, Zip Code	Telephone
Wilmington, DE 19898	(302) 774-8051

IOWA RESIDENT AGENT

Signature of Iowa Resident Agent 	
Typed Name of Iowa Resident Sarah Fiedler Thorn	
Mailing Address 400 Locust St. Suite 800	
City, State, Zip Code	Telephone
Des Moines, IA	(515) 334-6841

PARENT ENTITY, AFFILIATE, SPONSOR OF COMMITTEE
 (Use separate page if needed to list more than one entity)

Name E. I. du Pont de Nemours & Company	
Mailing Address 1007 Market Street	
City, State, Zip Code	
Wilmington DE 19898	

PURPOSE OF COMMITTEE: To solicit funds from executive employees for distribution to political parties, committees, or candidates for election to federal or state offices (except Delaware).

STATE OR FEDERAL JURISDICTION WHERE COMMITTEE IS REGISTERED OR OPERATES

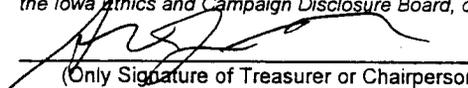
Name of Jurisdiction Federal Election Commission	
Mailing Address 999 E. Street, NW	
City, State, Zip Code	Telephone
Washington, DC 20463	(202) 376-5140

IOWA COMMITTEE RECEIVING CONTRIBUTION

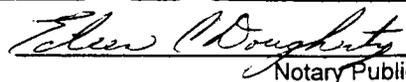
Name of Committee Klerme for State Representative	
Mailing Address 13191 Hickory Ave., Le Mars, IA 52339	
Date 8-8-02	If In Kind Contribution, Describe
Amount \$ 150.00	

VERIFIED STATEMENT OF COMMITTEE:

I, Stacey J. Mobley, swear that the contribution reported above is accurate. I further swear that the information about this out-of-state committee is correct and accurate to the best of my knowledge. I attest that the reports filed in the named jurisdiction comply with requirements which are substantially similar to Iowa Code section 56.6, including the disclosure of all contributions received and all expenditures made. I further attest that the contribution reported above was made from an account, which does not accept contributions from corporations or other prohibited contributors under Iowa Code section 56.15. I understand that Iowa committees are prohibited from accepting contributions from out-of-state committees unless a signed original of this form has been filed with the Iowa Ethics and Campaign Disclosure Board, or the out-of-state committee is registered and filing full disclosure reports in Iowa.

 (Only Signature of Treasurer or Chairperson) Chairperson (Title) 8-8-02 (Date)

Subscribed and sworn before me this 8th day of August, 2002 at _____

My notary commission expires _____
EILEEN C. DOUGHERTY
 NOTARY PUBLIC
 STATE OF DELAWARE
 Notary Public

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 (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
KLEMME FOR STATE 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
7/23/02	ID# CK# 1048	RED'S PRINTING 410 5TH AVE SW LE MARS IA 51031	PENCILS AND BROCHURES CAMPAIGN PURPOSES	938.30 \$
7/25/02	ID# CK# 1049	PAPER WAREHOUSE 4400 SERGEANT RD SIOUX CITY IA 51106	CANDY FOR PLYMOUTH COUNTY FAIR CAMPAIGN PURPOSES	38.44
7/25/02	ID# CK# 1050	FAREWAY STORES INC. 18 1ST AVE NE LE MARS IA 51031	PEANUTES FOR PLYMOUTH COUNTY FAIR, CAMPAIGN PURPOSES	22.00
8/22/02	ID# CK# 1051	CAPITAL DEMOCRAT 113 CENTRAL AVE SE ORANGE CITY IA 51041	1 YEAR SUBSCRIPTION TO NEWSPAPER, OFFICE HOLDER EXPENSE	24.00
9/4/02	ID# CK# 1052	PLYMOUTH COUNTY REPUBLICAN PARTY LE MARS IA 51031	FAIR BOOTH RENT FOR PLYMOUTH CO. FAIR - CAMPAIGN PURPOSES	100.00
9/8/02	ID# CK# 1053	ST. JOSEPH CHURCH 6TH AVE & PLYMOUTH ST SE LE MARS IA 51031	2 DINNERS - CAMPAIGN PURPOSES	13.00
9/9/02	ID# CK# 1054	IRETON EXAMINER 310 MAIN ST IRETON IA 51027	1 YEAR SUBSCRIPTION TO NEWSPAPER, OFFICE HOLDER EXPENSE	22.00
9/9/02	ID# CK# 1055	THE INDEPENDENT 800 CENTRAL AVE HAWARDEN IA 51023	1 YEAR SUBSCRIPTION TO NEWSPAPER, OFFICE HOLDER EXPENSE	24.50
SUB-TOTAL				\$ 1,182.24
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).)

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.

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

COMMITTEE NAME (Must be same as on Statement of Organization)
KLEMM FOR STATE 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
10/7/02	ID# CK# 1056	AKRON REGISTER TRIBUNE 131 REED ST AKRON IA 51001	1 YEAR SUBSCRIPTION OFFICE HOLDER EXPENSE	\$ 24.00
10/7/02	ID# CK#	LEGISLATIVE MAJORITY FUND DES MOINES IA	FOR STATE PARTY CANDIDATES CAMPAIGN PURPOSES	3,500.00
	ID# CK#			
SUB-TOTAL				\$ 3,524.00
TOTAL (if last page of this schedule)				\$ 4,706.24

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).)