

# DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 01/2001)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. # <u>1132</u>	
Indexed <u>SW</u>	
Audited _____	
Computer _____	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Nelson For State Representative

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 Slate of Candidates

**CANDIDATE COMMITTEES ONLY:**

Candidate Name <u>Richard "Ike" Nelson</u>	Political Party <u>Republican</u>
Office Sought <u>State Representative</u>	District (if Senate or House) <u>49</u>

OCT 18 2002

*pm 10-17*

Kenneth L. Johnson  
 SIGNATURE OF TREASURER (or person filing this report)

515-576-6383  
 TELEPHONE

Oct 17, 2002  
 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 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) 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**

<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>310,33</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>9,440.00</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>\$ 9,750.33</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	<u>9,434.81</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>\$ 315.52</u>

<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$ _____
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	<u>\$ 3139.49</u>
<b>**OUTSTANDING LOANS</b> (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) \$ None

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)

*Nelson 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 FU, RA, INC
07-18-02	ID# CK#	Ken Johnson		\$ 50	
08-20-02	ID# CK#	Eric Nelson	self	300	
08-20-02	ID# CK#	Bob Byrnes		25	
08-23-02	ID# CK#	Eric Nelson	self	50	
08-22-02	ID# 6021 CK# 1545	Credit Union PAC		1500	
08-28-02	ID# 6069 CK# 1963	Industrial Political Action		500	
08-29-02	ID# 6033 CK# 1818	EMC Co PAC		25	
09-03-02	ID# 6004 CK# 3963	ACC PAC		2000	
09-13-02	ID# 5307 CK# 6096	Allen J Blume		100	
09-16-02	ID# CK# 1747	Manufactured Homes PAC		500	
<b>SUB-TOTAL</b>				\$ 5050	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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)

Nelson For State Representative

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09-17-02	ID# 6125 CK# 1998	Iowa Realtors PAC		\$ 250	
09-19-02	ID# 6323 CK# 2729	Master Builders PAC		250	
09-23-02	ID# 6052 CK# 2606	Independent Insurance Agents		100	
09-23-02	ID# CK# 7205	Roger Huetig		20	
09-24-02	ID# CK# 2048	Iowa Podiatry PAC		100	
09-24-02	ID# 6237 CK# 1477	ABATE - PAC		250	
09-25-02	ID# 6234 CK# 3782	Iowa Farm Bureau PAC		250	
09-27-02	ID# 6101 CK# 2272	Motor Carriers PAC		500	
09-28-02	ID# 6155 CK# 3944	Taxpayers United PAC		500	
10-03-02	ID# CK# 1573	Credit Union PAC		1000	
SUB-TOTAL				\$ 3220	
TOTAL (if last page of this schedule)				\$	

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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)  
*Nelson 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.

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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 FUNDED BY INC.
10-03-02	ID# CK# 6748	Don Decker		\$ 100	
10-03-02	ID# CK# 5160	Dianne Decker		100	
10-03-02	ID# CK# 5302	Hoyt Allen		50	
10-03-02	ID# CK# 4753	Paul Becker		25	
10-03-02	ID# CK#	Allen Blume		50	
10-03-02	ID# CK#	Mark Brownlee		25	
10-03-02	ID# CK#	Pat Trotter		100	
10-03-02	ID# CK#	Scott McQueen		10	
10-03-02	ID# CK#	Terry Lutz		250	
10-03-02	ID# CK#	Shirley Fevold		25	
SUB-TOTAL				\$ 735	
TOTAL (if last page of this schedule)				\$	

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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)

Nelson For State Representative

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10-03-02	ID# CK#	Mike Gormack		\$ 25	
10-03-02	ID# CK#	Phil Liddle		25	
10-03-02	ID# CK#	Buck Boekelman		50	
10-03-02	ID# CK#	Doug Laird		25	
10-03-02	ID# CK#	Gene Medson		50	
10-03-02	ID# CK#	Adam Bohr		100	
10-03-02	ID# CK#	Gilbert Copper		10	
10-03-02	ID# CK#	Iowa Optometric Assn PAC		150	
	ID# CK#				
	ID# CK#				
SUB-TOTAL				\$ 435	
TOTAL (if last page of this schedule)				\$ 940	

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FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURE
<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)  
*Nelson 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
08-01-02	ID# CK# 2012	Party Productions Fort Dodge, IA	Candy For Harcourt Parade	\$ 21.84
08-15-02	ID# CK# 2013	Secretary of state Des Moines, IA	Voter Registration Computer Disc	22.42
08-15-02	ID# CK# 2014	Party Productions Ft Dodge, IA	Candy For Dayton Parade	9.66
08-20-02	ID# CK# 2015	Double M sign Co. 1850 3rd St Ft Dodge, IA	Vinyl Letters for outdoor signs	600.00
8-23-02	ID# CK# 2016	US Postal Service Fort Dodge, IA	Mail Letters To PAC's	44.40
08-27-02	ID# CK# 2017	Joselyn Press Ft Dodge, IA	Xerox Copies of PAC Letters	8.12
09-09-02	ID# CK# 2018	Kepler Clark Printing Ft Dodge, IA	8000 Brochures	695.37
09-11-02	ID# CK# 2019	Advertising + Supply 7630 Cass St Omaha, NE 68114	Yard Signs	476.00
SUB-TOTAL				\$ 1877.81
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)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

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

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COMMITTEE NAME (Must be same as on Statement of Organization)  
*Nelson 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
09-11-02	ID# CK# 2020	Watt Outdoor Signs Po Box 1353 Ft Dodge, IA 50501	2 Billboard Signs	\$ 1300.00
09-12-02	ID# CK# 2021	Walmart Store Ft Dodge, IA	1# Coffee, 3 Doz Donuts for Vincent New Co-op Meeting	17.80
09-16-02	ID# CK# 2022	Walmart Store Ft Dodge, IA	Coffee and Donuts for Bdger New Co-op Meeting	15.04
09-17-02	ID# CK# 2023	Americas Campaign Store 902 E Court Ave Jeffersonville IN 47130	500 Campaign Buttons	166.65
09-27-02	ID# CK# 2024	Americas Campaign Store 902 E Court Ave Jeffersonville, IN 47130	1000 Campaign Buttons	249.80
09-27-02	ID# CK# 2025	Office Max Ft Dodge, IA	Computer Ink and Paper	36.87
09-27-02	ID# CK# 2026	Ft Dodge Messenger Ft Dodge, IA	Newspaper Ads	451.25
09-28-02	ID# CK# 2027	US Postal Service Ft Dodge, IA	Stamps for Letters to Absentee Voters	37.00
SUB-TOTAL				\$ 2274.41
TOTAL (if last page of this schedule)				\$

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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).)

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**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURE
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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)  
Nelson 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
09-28-02	ID# CK# 2028	Matt Mallinger Ft Dodge, IA	Computer Input and Print Voter List	\$ 30.00
09-29-02	ID# CK# 2029	Victor Enterprises 5200 SW 30th St Davenport, IA 52802	Radio Ads Phase #1	1800.00
09-30-02	ID# CK# 2060	Americas Campaign Store 902 E Court Ave Jefferson, IN 47130	Freight on Campaign Buttons	67.20
09-30-02	ID# CK# 2061	Joselyn stationery store Ft Dodge, IA	Xerox Copies for Telephone Lists For Calls	11.83
09-30-02	ID# CK# 2062	Double M Signs 1830 3rd St Ft Dodge, IA	Letters for 4x6 Signs	95.40
10-02-02	ID# CK# 2030	Advertising + Supply Co 7630 Cass St Omaha, NE 68114	Wires for Yard Signs	120.40
10-06-02	ID# CK# 2031	Menards Ft Dodge, IA	Ply wood For Signs and 4 posts	48.25
10-06-02	ID# CK# 2032	US Postmaster Ft Dodge IA	stamps for letters to voters	111.00
SUB-TOTAL				\$ 2284.08
TOTAL (if last page of this schedule)				\$

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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)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURE
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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)  
*Nelson 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
10-10-02	ID# CK# 2033	Joselyn Press Ft Dodge, IA	Letters To Absentee Voters	\$ 31.80
10-11-02	ID# CK# 2035	Victory Enterprises 5200 SW 30th St Des Moines, IA 52802	TV Ads	2372.00
10-14-02	ID# CK# 2036	Americas Campaign Store 902 E Court Ave Jeffersonville, IN 47130	500 Campaign Buttons	216.65
10-14-02	ID# CK# 2037	Fred Lawson Ft Dodge IA	Take photos for use in folders	30.00
10-14-02	ID# CK# 2038	Mediacom Ft Dodge, IA	TV Ads Channel 12	70.00
10-14-02	ID# CK# 2039	Double M Signs Ft Dodge IA	Letters for Big Signs	63.60
10-14-02	ID# CK# 2040	Janna Korsjens Ft Dodge, IA	calling voters 911rc 500	45.00
10-14-02	ID# CK# 2041	Consumer News Ft Dodge, IA	Ad	146.81
<b>SUB-TOTAL</b>				<b>\$ 2975.86</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>

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SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURE
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COMMITTEE NAME (Must be same as on Statement of Organization)

*Nelson 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
	ID# CK#	<i>Wells Fargo Bank Ft Dodge IA</i>	<i>Bank charges Aug 7, Sept 9, Oct 7</i>	<i>\$ 22.65</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 22.65</i>
TOTAL (if last page of this schedule)				<i>\$ 9434.81</i>

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

Nelson For State Representative

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

CHECK THIS BOX IF AMENDING FORM

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS – SHOW LOANS ON SCHEDULE F)**

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
			\$
SUB-TOTAL			\$
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ <i>None</i>

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

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

Nelson For State Representative

SCHEDULE  
**E**  
(Rev. 06/97) IN KIND CONTRIBUTION

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-RAISEE CONTRIBUTION
✓ 10-10-02	Republican Party of Iowa 621 E 9 <sup>th</sup> St Des Moines, IA 50309		Mail House Inc Postage	\$ 3139.49	
SUB-TOTAL				\$	
TOTAL (If last page of this schedule)				\$	3139.49

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**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 Nelson For State Representative

<b>SCHEDULE</b> <b>F</b> (Rev. 08/96)	<b>LOANS RECEIVED &amp; REPAYED</b>
	<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>

**NOTE:** This schedule reports money loaned to the committee which is deposited in the committee account.

**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$** None

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**  
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
 (Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
	None		\$

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
	None		\$

**TOTAL (PART I)** \$ \_\_\_\_\_

**TOTAL CASH REPAYMENTS (PART II)** \$ \_\_\_\_\_

From Schedule E - **TOTAL LOANS FORGIVEN** \$ \_\_\_\_\_

**TOTAL OUTSTANDING LOANS END OF REPORT PERIOD** \$ None

\*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 when it applies.

**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

**G**  
(Rev. 02/96) **BREAKDOWN OF MONETARY EXPENDITURES BY CONSULTANT**

CHECK THIS BOX IF AMENDING FORM

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

*Nelson For State Representative*

**PART I - NAME AND ADDRESS OF CONSULTANT**

Name of Consultant *None*

Mailing Address

City State Zip Code

**TOTAL ANTICIPATED COMPENSATION FOR PERFORMANCE**

CONTRACT PERIOD (MM/DD/YR)

From \_\_\_\_\_ To \_\_\_\_\_

\$ \_\_\_\_\_

**ESTIMATES OF PERFORMANCE**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PART II - ITEMIZED BREAKDOWN OF UNREIMBURSED EXPENSES PAID BY CONSULTANT TO OTHERS IN PERFORMING SERVICES OF CONTRACT (These expenses should NOT be reported on Schedule B, as they are direct payment from the consultant.)**

DATE EXPENDED (MM/DD/YR)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE	AMOUNT EXPENDED
	<i>None</i>		\$

SUB-TOTAL \$ \_\_\_\_\_

TOTAL (If last page of this schedule) \$ *None*

COMMITTEE NAME (Must be same as on Statement of Organization)  
Nelson For State Representative

ATTACH SCHEDULE H TO  
EACH REPORT, MAKING  
CHANGES AS REQUIRED.

CHECK THIS BOX IF  
AMENDING FORM

**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

**PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY \*\***

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
	None		

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation
	None				

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT  
(TRANSFER TO SUMMARY PAGE) \$ None

\*\* PROPERTY SALES & TRANSFERS TOTAL  
(TRANSFER TO SUMMARY PAGE) \$ None

TOTALS \$ \_\_\_\_\_ \$ \_\_\_\_\_

\* If estimated, show *est.* beside figure.

(Attach Additional Schedules if Needed)