

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 05/2002)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>SN 1411</u>
Indexed	<u>SN</u>
Audited	_____
Computer	_____

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

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 SEYMOUR, JAMES A Political Party Republican
Office Sought SENATE District (if Senate or House) SD-28

James A. Seymour (712) 647-2699
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

OCT 21 2002
HO
Oct. 18, 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 18, 2002 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

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.)\$ 5373.77

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 17,150.00

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.....\$ 22,523.77

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ... 16,284.17

Schedule F: Loan Repayments total (Attach Schedule F) 5,000.00

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$ 1,239.60

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

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ 4,217.56

**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) \$ NONE

For Instructions, See Back of Form

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)

SEYMOUR FOR SENATE

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
✓ 8/24/02	ID# 6004 CK# 3910	ASSOCIATED GEN. CONTRACTORS PAC PO Box 957 DES MOINES, IA. 50303		\$ 2500 ⁰⁰	
✓ 8/26/02	ID# 6116 CK# 1043	IOWA-NE EQUIPMENT DEALERS ASSOC 1311 50TH ST. WEST DES MOINES, IA. 50265		100 ⁰⁰	
✓ 8/23/02	ID# 6101 CK# 2254	MOTOR CARRIERS PAC P.O. BOX 6121 E. DES MOINES ST DES MOINES, IA 50309		250 ⁰⁰	
✓ 8/23/02	ID# 6069 CK# 1944	IOWA INDUSTRY PAC 904 WALNUT ST. DES MOINES, IA. 50309		500 ⁰⁰	
8/23/02	ID# CK# 2950	CHARLES J. MARR 1229 N. 97 PLAZA OMAHA, NE. 68114		150 ⁰⁰	✓
8/23/02	ID# CK# 6499	KEVIN J. NOKELS 9690 MEADOWS DR. OMAHA NE 68114		50 ⁰⁰	✓
9/5/02	ID# CK# 2954	CARL V. & VICTORIA SIMMONS PO BOX 223 VALENTINE, NE. 69201	SON-IN-LAW	100 ⁰⁰	✓
✓ 9/11/02	ID# 6059 CK# 2286	IOWA COMMITTEE OF AUTO RETAILERS (ICAR) 1111 OFFICE PARK W. DES MOINES		500 ⁰⁰	
✓ 9/24/02	ID# 6323 CK#	MASTER BUILDERS OF IOWA 221 PARK ST. PO BOX 695 DES MOINES IA 50303		500 ⁰⁰	
✓ 9/20/02	ID# 6064 CK# 1597	IOWA DENTAL ASSOC 505 5 AVE SUITE 333 DES MOINES, IA. 50309		100 ⁰⁰	

SUB-TOTAL \$ 4750

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 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)

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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 FOR FUND-RAISER INCOME
7-22-02	ID# CK# 1108	1568 170TH TR MAUDAMIN IA. 51557- HARRISON Co. GOP WOMEN		\$ 250.00	
9-18-02	ID# CK# 6627	KEN & NANCY STRICK 5746 - 280TH IDA GROVE IA. 51445		50.00	
10-7-02 9-25-02	ID# 6323 CK# 2775	MASTER BUILDERS PAC 221 PARK ST. PO BOX 695 DES MOINES IA. 50303		500.00 750.00	
9-25-02	ID# 6064 CK# 1696	IOWA ASSOC. OF ELECTRIC COUNP FORE. 8525 Douglas, Suite #48 URBANDALE IA. 50322		200.00	
9-25-02	ID# CK# 1103	Ida County GOP Central Comm. c/o Dan Murray 401 7th St Ida Grove, IA. 51445		200.00	
9-25-02	ID# 6052 CK# 2583	INDEPENDENT INS. AGENTS OF IOWA 11A1/PK 4000 WESTOWN PARKWAY WEST DES MOINES IA 50266		200.00	
9-25-02	ID# 6027 CK#	John Deere & Co. 606 Grand Ave DES MOINES, IOWA 50309		500.00	
9-25-02	ID# 6021 CK# 1551	IOWA CREDIT UNION PAC P.O. Box 10409 DES MOINES, IOWA 50306		1500.00	
10/2/02	ID# 6096 CK# 1649	IOWA MANUFACTURED HOUSING ASSOC. 1400 DEAN AVE DES MOINES, IOWA 50316		500.00	
10/2/02	ID# 6291 CK# 2184	IOWA HOSPITAL ASSOC. 100 E. Grand Suite 100 DES MOINES IOWA 50309		500.00	
SUB-TOTAL				\$ 4650	
TOTAL (if last page of this schedule)				\$	

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CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MCNETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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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
9-26-02	ID# 6155 CK# 3953	TAXPAYERS UNITED 2610 Park Ave MUSCATINE IA. 52761		\$ 500.00	
10/7/02	ID# 6004 CK# 3998	ASSOC. GENERAL CONTRACTORS of Iowa. PO Box 757 DES MOINES, IA. 50303		1000.00	
10/7/02	ID# 9626 CK# 1366	THE LINCOLN CLUB c/o LON ANDERSON 5460-Z Longview Ct. Johnston IA - 50131		750.00	
10/7/02	ID# 6082 CK# 842	MID-AMERICAN ENERGY 666 Grand Ave PO Box 657 DES MOINES IA 50303		200.00	
10/10/02	ID# CK# 3096	IOWA BASKET PAC # 8800 NW 62ND AVE JOHNSTON, IOWA 50131		500.00	
10/10/02	ID# 6021 CK# 1575	IOWA CREDIT UNION PAC PO Box 10409 DES MOINES, IOWA 50306		1000.00	
10/10/02	ID# 6155 CK# 4018	TAXPAYERS UNITED 2610 Park Ave MUSCATINE IA. 52761		500.00	
10/10/02	ID# 6155 CK# 4050	TAXPAYERS UNITED 2610 Park Ave MUSCATINE IA		500.00	
10/10/02	ID# 6155 CK# 4090	TAXPAYERS UNITED 2610 Park Ave MUSCATINE IA		500.00	
10/12/02	ID# 6125 CK# 2031	IOWA REALTORS PAC 1370 N.W. 114th St Ste #100 CLIVE, IA. 50325		1000.00	
SUB-TOTAL				\$ 6450	
TOTAL (if last page of this schedule)				\$	

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

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

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
7/18/02	ID# CK# 1011	US Post office Woodbine, Iowa 51579	100 First Class Stamps	\$ 37.00
8/5/02	ID# CK# 1012	Jim Seymour 901 White St. Woodbine IA 51579	Campaign Mileage Expense	751.17
8/7/02	ID# CK# 1013	Regal Printing 10120 2 St Omaha, NE 68127	Brochures 12,000	1315.00
8/23/02	ID# CK# 1014	Jim Seymour 901 White St. Woodbine IA 51579	3000 Notepads Victory Store Chg To Mastercard	603.25
8/26/02	ID# CK# 1015	Verizon Wireless PO Box 790422 St Louis MO 63179	Cell Phone	39.23
9/4/02	ID# CK# 1016	Crawford Co. Auditor Denison, Iowa	Register Voters (GOP) Address List	25.00
9/23/02	ID# CK# 1017	Verizon Wireless PO Box 790422 St. Louis MO 63179	Cell Phone	38.87
9/27/02	ID# CK# 1018	Iowa Newspaper Assoc c/o Republican Party of Iowa - 921 E. 9th Des Moines	Newspaper Ads	5,712.80
SUB-TOTAL				\$ 8522.32
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

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<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)
SEYMOUR FOR SENATE

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
9/27/02	ID# CK# 1019	VICTORY ENTERPRISES 5200 SW. 30TH ST DAVENPORT IA. 52802	Radio Spot Buys KDSN DENISON	\$ 988.40
10/7	ID# CK# 1020	US POST OFFICE WOOD BINE, IA. 51579	STAMPS & POSTAGE	37.60
10/14/02	ID# CK# 1021	VICTORY ENTERPRISES 5200 SW. 30TH ST. DAVENPORT, IA. 52802	Radio Spots KDSN Buys DENISON	1433.60
10/14/02	ID# CK# 1022	VICTORY ENTERPRISES DAVENPORT, IA 52802	Radio Spots KDSN Buys DENISON	911.12
10/14/02	ID# CK# 1023	IOWA Newspaper ASSOC CLS IOWA REBUBLIKON PARTY	NEWSPAPER ADS	400.00
10/16/02	ID# CK# 1024	OFFICE MAX COUNCIL BLUFFS IA.	Office Supplies copy paper envelopes etc	41.87
10/17/02	ID# CK# 1026	VICTORY ENTERPRISES DAVENPORT, IA. 52802	Radio Spots Council cloth - Sioux City	1916.40
10/17/02	ID# CK# 1027	VERIZON WIRELESS PO BOX 790422 ST. LOUIS MO. 63179	CELL PHONE	38.87
SUB-TOTAL				\$ 5767.86
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

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
<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)
SEYMOUR FOR SENATE

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
OCT 18, 2002	ID# CK# 1028	JIM SEYMOUR 901 WHITE ST WOODBINE, IA 51579	MILEAGE EXPENSE 7-16-02 TO 10-18-02 5,463 miles @ .365¢	\$ 1,993.99
	ID# CK#			

SUB-TOTAL	\$ 1993.99
TOTAL (if last page of this schedule)	\$ 16,284.17

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

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

SEYMOUR FOR SENATE

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input 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
✓ 10/10/02	IOWA Farm Bureau Fed. 5400 UNIVERSITY AVE WEST DES MOINES IA. 50266		2x4 Farm Family Yard STONS	\$ 564.68	
✓ 10/7/02	Republican Party of IA 621 E. 9TH ST DES MOINES, IA. 50309		US Postage	844.33	
✓ 10/9/02	Republican Party of IA 621 E. 9TH ST. DES MOINES, IA		U.S. Postage	844.33	
✓ 10/11/02	Republican Party of Iowa 621 E. 9TH. DES MOINES IA		US Postage	1,427.97	
9/25/02	Minky M. Zgodta 2121 Mayfair Dr. Omaha, NE 68144		Campaign Brochure	536.25	

SUB-TOTAL \$

TOTAL (if last page of this schedule) \$ 4217.56

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

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

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 5,000.00

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.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
Oct. 16 2002	JAMES A. SEYMOUR 901 WHITE ST. WOODBINE, IOWA 51579	Self	\$ 5,000.00

TOTAL CASH REPAYMENTS (PART II) \$ 5,000.00

From Schedule E -- TOTAL LOANS FORGIVEN \$ —

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ —

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