

**DISCLOSURE SUMMARY PAGE**

OCT 21 2002  
pm 10-19

<b>FORM DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	0477
Indexed	SW
Audited	
Computer	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
RDH PAC # 6477

**IMPORTANT:** Indicate type of committee you are reporting for:  2

( 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

Susan H. Ollman 641-424-6295 10/17/2002  
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 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.) .....\$ 4633.22

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ..... -0-

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.....\$ 4633.22

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ..... 1888.94

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) .....\$ ~~27~~ 2744.28

**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

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
**RDH PAC # 6477**

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
8/15/02	ID# CK# 1008	Winkel blacks P.O. Box 161 - 1321 Denny Ave Milford, IA 51351	Fundraiser supplies	\$ 1888.94
	ID# CK#			
SUB-TOTAL				\$ 1888.94
TOTAL (if last page of this schedule)				\$ 1888.94

**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).)