

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1226
Indexed	
Audited	
Computer	WRS

COMMITTEE NAME (Must be same as on Statement of Organization)
Atteberry for House - #1226

IMPORTANT: Indicate type of committee you are reporting for 1
 (1) Statewide/Legislative Committee

JAN 10 2003
 PM 1-9

[Signature]
 SIGNATURE OF TREASURER (or Person filing this report) Telephone _____

1/7/03
 Date Signed

Routine Penalties Due for Late Filed Reports Range from \$20 to \$800

See Instruction on back and complete the following sentence:

I AM FILING A ~~Nov 1, 2003~~ REPORT FOR AN/A (1) ELECTION/(2) NON-ELECTION YEAR

Jan 18, 2003 (report Date)

10 30-02

Indicate one 1

CHECK IF AMENDMENT TO REPORT DATED Nov. 1, 2003

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 the first report filed.)

\$ 1,811.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)

6,000.00

Schedule F: Loans Received total (Attach Schedule F)

2,000.00

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

(Schedule H applies to Candidates' Committee Only)

SUB-TOTAL \$ 9,811.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)

8,947.87

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)

\$ 863.13

UNPAID BILLS (from Schedule D - Attach Schedule D)

\$

INKIND CONTRIBUTIONS (from Schedule E - Attach Schedule E)

\$ 24,040.02

OUTSTANDING LOANS (from Schedule F - Attache Schedule F)

\$

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

Yes No

VALUE OF CAMPAIGN PROPERTY (from Schedule H - Attache Schedule H)

\$

**Contributions - Money Taken In
(Including candidate's personal funds)**

Schedule A
(Rev 05/97)

Monetary
Receipts

COMMITTEE NAME (Must be same as on Statement of Organization)
Atteberry for House (ID # 1226)

Check this box if
amending

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 688.32A(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	Pac ID Number Pac Check Number	Name & Address of Contributor	Relationship to Candidate	Amount Received	x for Fund Raiser Income
10/30/2002	ID# Ck#	Mrs. E. Michael Carr 100 E. Union St Manchester IA 52057		\$50.00	
10/30/2002	ID# 6084 Ck# 695	Iowa State UAW-PAC 2700 S. River Rd. Ste 200 Des Plaines IL 60018		\$500.00	

Disclosure law requires candidate committees to disclose the relationship 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.

SUBTOTAL

TOTAL (If last
page of this
schedule)

\$550-

\$550-

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 AND CAMPAIGN DISCLOSURE BOARD.

Schedule B (Rev. 09/97)	Monetary Expenditures
<input checked="" type="checkbox"/> Check this box if amending form	

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

Date Expended	Candidate ID Number PAC Check Number	NAME AND ADDRESS TO WHOM EXPENDITURE (disbursement) WAS MADE	Purpose	Amount Expended
10/21/2002		Telegraph Herald 801 Bluff St Dubuque IA <i>Originally entered as \$1818.25 - should have been</i>	Ads	\$0.25 <i>1818.50</i>
10/29/2002		Hopkinton Leader 101 1st St. - PO Box Hopkinton IA 52237	subscription	\$25.00
10/30/2002		KDST 1931 20th Ave SE Dyersville IA	Radio Ads	\$143.75
10/30/2002		KDTH 346 W. 8th Dubuque IA	Ads	\$248.00
10/31/2002		Staples 190 John F. Kennedy Rd Dubuque IA 52002	Office Supplies	\$88.37

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.)

SUB-TOTAL
TOTAL (IF LAST PAGE OF THIS SCHEDULE)

506.37
505.37

EXPENDITURES TO PERSONS/ENTITIES PROVIDING CONSULTING, ADVERTISING, FUNDRAISING, POLLING, MANAGING, ORGANIZING SERVICES MUST ALSO BE DETAIL ITEMIZED ON SCHEDULE G BY AMOUNT, PURPOSE, AND DATE OF EACH TYPE OF EXPENDITURE MADE BY THE PERSON/ENTITY ON BEHALF TO HE THE CANDIDATE'S COMMITTEE. (REFER TO SCHEDULE G INSTRUCTIONS AND IOWA CODE 56.6(3)(i).)

COMMITTEE NAME (Must be same as on Statement of Organization)
Atteberry for House #1266

Schedule E (Rev. 06/97)	In Kind Contributions
<input checked="" 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	CHECK IF FOR FUND-RAISER CONTRIBUTION
10/29/2002	Iowa Democratic Party 5661 Fleur Drive Des Moines IA 50321	9098	Postage for direct mail	\$563.12	OK

SUB-TOTAL	\$ 563.12
TOTAL (IF LAST PAGE OF THIS SCHEDULE)	\$ 563.12

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For Office Use Only	
Comm. #	<u>1226</u>
Indexed	<u>2</u>
Audited	
Computer	<u>WAS</u>

10/30/02
Date Signed

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

IMPORTANT: Indicate type of committee you are reporting for 1
(1) Statewide/Legislative Committee

NOV - 4 2002
FILED PM 10.3

[Signature]
SIGNATURE OF TREASURER (or Person filing this report) Telephone

Routine Penalties Due for Late Filed Reports Range from \$20 to \$800

See Instruction on back and complete the following sentence:

I AM FILING A Nov 4, 2002 REPORT FOR AN/A (1) ELECTION/(2) NON-ELECTION YEAR
(report Date)

- CHECK IF AMENDMENT TO REPORT DATED See amendment report
- 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.)

Indicate one 2

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 the first report filed.) \$ 1,841.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 5,450.00

Schedule F: Loans Received total (Attach Schedule F) 2,000.00

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

(Schedule H applies to Candidates' Committee Only)

SUB-TOTAL \$ 9,291.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 8,442.50

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) \$ 848.50

UNPAID BILLS (from Schedule D - Attach Schedule D) \$ _____

INKIND CONTRIBUTIONS (from Schedule E - Attach Schedule E) \$ 23,476.58

OUTSTANDING LOANS (from Schedule F - Attache Schedule F) \$ 2,000.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) _____ Yes _____ No

VALUE OF CAMPAIGN PROPERTY (from Schedule H - Attache Schedule H) \$ _____

**Contributions - Money Taken In
(Including candidate's personal funds)**

Schedule
A (Rev
05/97)

Monitory
Receipts

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

Atteberry for House ID # 1226

Check this box if
amending

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACITON 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 688.32A(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	Pac ID Number Pac Check Number	Name & Address of Contributor	Relationship to Candidate	Amount Received	x for Fund Raiser Income
✓ 10/15/2002	ID# 6046 Ck# 3583	Justice for All PAC 218 - 6th Ave., Ste 526 Des Moines IA 50309		\$1000.00	
10/15/2002	ID# Ck#	Arthur Johnson 106 Woods Edge Dr Edgewood IA 52040		\$50.00	
✓ 10/15/2002	ID# 6058 Ck# 2083	Iowa Chiropractic Society PAC 1605 N. Ankeny Blvd, Suite 100 Ankeny IA 50021		\$150.00	
✓ 10/17/2002	ID# 6113 Ck#	AFSCME 4320 N.W. Second Ave Des Moines IA 50313		\$1000.00	
10/19/2002	ID# Ck#	Duane Atteberry 1034 Sherman Ave Manchester IA 52057	Husband	\$1000.00	
✓ 10/19/2002	ID# 6237 Ck# 1520	ABATEPAC 3118 Eastern Ave Cedar Rapids IA 52402		\$250.00	
✓ 10/19/2002	ID# 6086 Ck# 12836	ISEA-PAC 777 3RD Sreet Des Moines IA 50309		\$1000.00	
10/22/2002	ID# Ck#	Jim and Doris Eike 2027 310th St Hopkinton IA 52237		\$50.00	
✓ 10/23/2002	ID# 6077 Ck# 1619	Iowa Pharmacy PAC 8515 Douglas Suite 16 Des Moines IA 50322		\$100.00	

Disclosure law requires candidate committees to disclose the relationship 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, etner "not applicable" in the relationship column.

s/b 4600.00

SUB-TOTAL

TOTAL (If last
page of this
schedule)

4500.00

**Contributions - Money Taken In
(Including candidate's personal funds)**

Schedule A (Rev 05/97) Monetary Receipts

COMMITTEE NAME (Must be same as on Statement of Organization)
Atteberry for House ID # 1226

Check this box if amending

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACITON 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 688.32A(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	Pac ID Number Pac Check Number	Name & Address of Contributor	Relationship to Candidate	Amount Received	x for Fund Raiser Income
10/23/2002	ID# Ck#	Robert Sack PO Box E Manchester, IA 52057		\$100.00	
10/23/2002	ID# Ck#	Paul Scherrman 104 Michigan Ave 10/23/2002 - Farley, IA 52046		\$100.00	
✓ 10/24/2002	ID# 6478 Ck# 1066	Iowa Assoc of Nurse Anesthetists 1156 Forest St Carrol IA 51404		\$100.00	
✓ 10/24/2002	ID# 9062 Ck#	Dubuque County Democrats PO Box 686 Dubuque IA 52004		\$500.00	
10/25/2002	ID# Ck#	Keith or Earlene Thompson 17084 191st Street Manchester IA 52057		\$50.00	

Disclosure law requires candidate committees to disclose the relationship 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.

S/B 850.00
SUB-TOTAL

TOTAL (If last page of this schedule)

950.00
5450.00 ✓

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 AND CAMPAIGN DISCLOSURE BOARD.

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

Date Expended	Candidate ID Number PAC Check Number	NAME AND ADDRESS TO WHOM EXPENDITURE (disbursement) WAS MADE	Purpose	Amount Expended
10/15/2002		KMCH 223 W. Main Manchester IA 52057	40 more ads	\$326.00
10/16/2002		KDST 1931 20th Ave SE Dyersville IA	Radio Ads	\$956.25
10/17/2002		KDTH 346 W. 8th Dubuque IA	Radio Ads	\$1530.00
10/21/2002		Telegraph Herald 801 Bluff St Dubuque IA	Ads	\$1818.25
10/21/2002		KAT 346 W. 8th Dubuque IA	Ads	\$1664.00
10/21/2002		Iowa Democratic Party 5661 Fleur Drive Des Moines IA	Truman Fund	\$1500.00
10/26/2002		KMCH 223 W. Main Manchester IA 52057	Ads	\$163.00
10/26/2002		KDST 1931 20th Ave SE Dyersville IA	Ads	\$125.00
10/26/2002		KDTH 346 W. 8th Dubuque IA	Ads	\$360.00

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.)

SUB-TOTAL
 TOTAL (IF LAST PAGE OF THIS SCHEDULE)

8442.50

EXPENDITURES TO PERSONS/ENTITIES PROVIDING CONSULTING, ADVERTISING, FUNDRAISING, POLLING, MANAGING,
 ORGANIZING SERVICES MUST ALSO BE DETAIL ITEMIZED ON SCHEDULE G BY AMOUNT, PURPOSE, AND DATE OF EACH
 TYPE OF EXPENDITURE MADE BY THE PERSON/ENTITY ON BEHALF TO HE THE CANDIDATE'S COMMITTEE. (REFER TO
 SCHEDULE G INSTRUCTIONS AND IOWA CODE 56.6(3)(i)(.))

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

Atteberry for House #1266

Schedule
E
(Rev. 06/97)

In Kind
Contributions

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	CHECK IF FOR FUND-RAISER CONTRIBUTION
10/23/2002	Duane Atteberry 105 E. Butler St Manchester IA 52057	Husband	Fax use - 25 pages @ \$2.00 per page	\$50.00	
10/15/2002	Iowa Democratic Party 5661 Fleur Drive Des Moines IA 50321	9098	Production - Mailing	\$4379.32	OK
10/18/2002	Iowa Democratic Party 5661 Fleur Drive Des Moines IA 50321	9098	Production - mailing	\$8000.00	OK
10/21/2002	Iowa Democratic Party 5661 Fleur Drive Des Moines IA 50321	9098	Production - Mailing	\$4380.06	OK
10/22/2002	Iowa Democratic Party 5661 Fleur Drive Des Moines IA 50321	9098	Production and Postage - Mailing	\$2563.12	OK
10/24/2002	Iowa Democratic Party 5661 Fleur Drive Des Moines IA 50321	9098	Production and Postage - Mailing	\$2333.76	OK
10/25/2002	Iowa Democratic Party 5661 Fleur Drive Des Moines IA 50321	9098	Production - Mailing	\$1770.64	OK

SUB-TOTAL

TOTAL (IF LAST PAGE OF THIS SCHEDULE)

23476.58

90

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

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 \$ _____

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
10-17-2002	Andra Atteberry 1034 Sherman Manchester IA 52057	Self	\$ 2000.00

TOTAL (PART I) \$ 2000.00

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
			\$

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E -- TOTAL LOANS FORGIVEN \$ _____
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 2,000.00

*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.