

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

DISCLOSURE BOARD
 NOV - 1 2002
 PM 10:31
FILED

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1412</u>
Indexed	<u> </u>
Audited	<u> </u>
Computer	<u> </u>

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

George W. House 641-622-2031 10-31-02
 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 OCT. 15, 2002 - OCT. 29, 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.)	\$	<u>8120.05</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A)		<u>5985.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u> </u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u> </u>
(Schedule H applies to Candidates' Committees Only)		
	SUB-TOTAL.....\$	<u> </u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B)		<u>12437.72</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u> </u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>1667.33</u>
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u> </u>
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>13,367.00</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u> </u>
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<u> </u> YES <u> </u> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u> </u>

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)
Susan Conroy for 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/YYR)	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
10-17-02	ID# CK#	Ronald Kielkopf 11753 W. Hwy 149 Fremont, IA 52561		\$ 100.00	
✓ 10-17-02	ID# 6077 CK# 1658	IOWA PHARMACY PAC 8515 Douglas, Suite 16 Des Moines, IA 50322		100.00	
✓ 10-19-02	ID# 6406 CK# 1022	Emily's List - NF Fund 805 15th St. NW, Suite 400 Washington DC 20005		500.00	
✓ 10-19-02	ID# 9656 CK# 1097	Effective Government Comm. 607 14th St. NW Suite 800 Washington DC 20005		1000.00	
✓ 10-18-02	ID# 8022 CK# 731	SEIU PEA INTERNATIONAL 1313 L. St NW Washington D.C. 20005		2500.00	
10-19-02	ID# CK#	Paulee Lipsman 2880 Grand Ave. #106 Des Moines IA 50312		50.00	
✓ 10-21-02	ID# 6237 CK# 1534	ABATE PAC 3118 Eastern Ave. NE Cedar Rapids IA 52402		250.00	
✓ 10-22-02	ID# Verified Statement CK# 1772	Harrah's Entertainment Inc PAC One Harrah's Ct. Las Vegas NV 89119		300.00	
10-24-02	ID# CK#	Scott Graham Gibson, IA 50104		50.00	
10-25-02	ID# CK#	David E. Noller 23183 270th Ave SIGOURNEY IA 52591		50.00	

SUB-TOTAL

\$4900

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)
Susan Conroy for 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
10-29-02	ID# CK#	<i>Susan Conroy 707 E. Pleasant Valley St. SIGOURNEY IA 52591</i>	<i>Self</i>	<i>\$ 1000.00</i>	
10-29-02	ID# CK#	<i>unitemized contributions</i>		<i>85.00</i>	
	ID# CK#				

SUB-TOTAL

\$ 1085.00

TOTAL (if last page of this schedule)

\$ 5985.00

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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)
Susan Conroy for 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
10-18-02	ID# CK#	<i>SIGOURNEY NEWS REVIEW SIGOURNEY, IA 52591</i>	<i>Advertising + copies</i>	<i>\$ 67.30</i>
10-18-02	ID# CK#	<i>Richland Plainsman Clarion Richland, IA 52585</i>	<i>Advertising</i>	<i>26.04</i>
10-18-02	ID# CK#	<i>Williamsburg Journal PO Box 690 Williamsburg, IA 52361</i>	<i>Advertising</i>	<i>133.20</i>
10-18-02	ID# CK#	<i>What Cheer Paper P.O. Bx 414 What Cheer, IA 50268</i>	<i>Advertising</i>	<i>40.00</i>
10-21-02	ID# CK#	<i>USPS 115 W. Washington St SIGOURNEY IA 52591</i>	<i>Stamps</i>	<i>37.00</i>
10-25-02	ID# CK#	<i>Iowa Democratic Party 5661 Fleur Dr Des Moines, IA 50321</i>	<i>contribution</i>	<i>5000.00</i>
10-25-02	ID# CK#	<i>MPC newspapers Journal Tribune P.O. Box 690 Williamsburg, IA 52361</i>	<i>Advertising</i>	<i>636.40</i>
10-25-02	ID# CK#	<i>SIGOURNEY News-Review SIGOURNEY IA 52591</i>	<i>Advertising</i>	<i>262.80</i>
SUB-TOTAL				<i>\$ 6202.74</i>
TOTAL (if last page of this schedule)				<i>\$</i>

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

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)
Susan Conroy for 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
10-25-02	ID# CK#	USPS 115 W. Washington St. SIGOURNEY IA 52591	Stamps	\$ 37.00
10-25-02	ID# CK#	Richland Plainsman- Clarion Richland, IA 52585	Advertising	205.66
10-28-02	ID# CK#	What Cheer Paper What Cheer, IA 50268	Advertising	95.00
10-28-02	ID# CK#	USPS 115 W. Washington St - SIGOURNEY IA 52591	Stamps/postage	28.98
10-28-02	ID# CK#	Farm Bureau Spokesman P.O. Bx 640 IOWA FALLS, IA 50126	Advertising	177.63
10-28-02	ID# CK#	Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591	reimbursement (office supplies)	78.24
10-28-02	ID# CK#	Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591	reimbursement (gas)	42.18
10-29-02	ID# CK#	KCII WASHINGTON IA 52353	Radio Advertising	476.70
SUB-TOTAL				\$ 1141.39
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

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)

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
✓ 10-16-02	ID# CK#	Iowa Democratic Party 5661 Fleur Dr. Des Moines, IA 50321	contribution	\$5000.00
10-17-02	ID# CK#	Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591	reimbursement (gas)	46.58
10-17-02	ID# CK#	Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591	reimbursement (office supplies)	10.01
10-17-02	ID# CK#	Keith Goodman P.O. Bx 183 SIGOURNEY IA 52591	reimbursement (postage)	37.00
	ID# CK#			

SUB-TOTAL \$ 5093.59
 TOTAL (if last page of this schedule) \$ 12,437.72

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).)

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COMMITTEE NAME (Must be same as on Statement of Organization)
Susan Conroy for Representative

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
✓ 10-15-02	IOWA DEMOCRATIC PARTY 5661 Fleur Dr. DES MOINES, IA 50321		Production of direct mail piece.	\$ 2900.00	
✓ 10-18-02	IOWA DEMOCRATIC PARTY 5661 Fleur Dr. DES MOINES, IA 50321		Production of direct mail piece.	2625.00	
✓ 10-23-02	IOWA DEMOCRATIC PARTY 5661 Fleur Dr. DES MOINES, IA 50321		Production of direct mail piece.	2000.00	
✓ 10-24-02	IOWA DEMOCRATIC PARTY 5661 Fleur Dr. DES MOINES, IA 50321		Production and postage for direct mail piece.	4120.00	
✓ 10-25-02	IOWA DEMOCRATIC PARTY 5661 Fleur Dr. DES MOINES, IA 50321		Production of direct mail piece.	511.00	
✓ 10-28-02	IOWA DEMOCRATIC PARTY 5661 Fleur Dr. DES MOINES, IA 50321		Postage for direct mail piece.	568.00	
✓ 10-29-02	IOWA DEMOCRATIC PARTY 5661 Fleur Dr. DES MOINES, IA 50321		Postage for direct mail piece.	568.00	
10-24-02	Stephanie Hauptert 1621 Zephyr Ave What Cheer, IA 50268		postcards, index cards + ink.	75.00	

SUB-TOTAL \$ 13,367.00
 TOTAL (if last page of this schedule) \$ 13,367.00

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.