

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 03/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1358
Logged In	
Scanned	
Audited	
Computer	WRS

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

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 _____ Political Party _____
 Office Sought _____ District (if Senate or House) 11D

X Joe Kelly _____ X 6/9/03
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A _____ REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate one

CHECK IF AMENDMENT TO REPORT DATED 11/1/02

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.) 518,168.09 \$ 14,487.79

ADD TOTAL MONEY TAKEN IN THIS PERIOD 518,12,425.00

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 12,175.00 -

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.....\$ 13,823.79

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)... 13,946.50 -

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) 518,166.59 \$ 122.717

****UNPAID BILLS** (From Schedule D - Attach Schedule D) \$ 182.16

***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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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

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
11/31/02	ID# CK#	RETIREE JENNIFER PASS THE HAT		\$ 320-	✓
11/01/02	ID# CK# 105	JOHN NORRIS ^{for Congress} (PHONE), 120 Kellogg Ave USE OF OFFICE & PHONES Ames, IA		150-	0
✓ 11/01/02	ID# 9656 CK# 1153	EFFECTIVE GOV. Com 1207 14th St NW WASHINGTON DC 20005	OUT OF state 5 PAC	5000-	0
11/25/02	ID# CK#	RESTAURANT		2155	
10/28/02	ID# 8026 CK# 5273	*IBEW		250.00	
	ID# CK#				

SUB-TOTAL
SIB 5720.00
TOTAL (if last page of this schedule) \$ 5,470 ✓

* 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.

Per VSR dated 10-23-02

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
4/25/03	ID# CK#	Postage expense Returns	Cash back from unused postage	\$81.75 ⁰
	ID# CK#			

SUB-TOTAL \$

TOTAL (if last page of this schedule) \$81.75⁰

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).)



Invoice for Advertising

DesMoinesRegister.com

The Des Moines Register

715 Locust Street • Des Moines, IA 50309

BILLING INQUIRIES:
 DISPLAY: (515) 284-8240
 CLASSIFIED: (515) 284-8294
 FAX: (515) 284-8558

1

JOE KELLY FOR LEGISLATURE

JOE KELLY FOR LEGISLATURE
 PO BOX 248
 DALLAS CENTER IA 50063-0248

CUSTOMER NO.	INVOICE NO.
DUE DATE	AMOUNT DUE
FOR THE PERIOD	THRU
	10/20/02

*** * MEMO BILL * ***

DATE	EDT	CLA	DESCRIPTION	COL	DEPTH	TIMES	SIZE	RATE	AMOUNT
1030			ESTIMATED DIRECT MAIL POSTAGE						1,425.00
								TOTAL BILL	1,425.00
CURRENT			OVER 30 DAYS	OVER 60 DAYS	OVER 90 DAYS	OVER 120 DAYS	TOTAL DUE		
CONTRACT TYPE	CONTRACT QUANTITY	EXPIRATION DATE	CURRENT USAGE	TOTAL USED	QUANTITY REMAINING	SALESPERSON			

CUSTOMER NUMBER	CUSTOMER NAME	INVOICE NUMBER



Raccoon Valley State Bank

ADEL, IOWA - OFFICES: DALLAS CENTER & MINBURN
MEMBER FDIC

DATE 11-1-02

ACCOUNT NO. 6101496

All items are received by this bank subject to the conditions and terms stated on the signature cards currently used by this bank. Deposits may not be available for immediate withdrawal.

NAME KELLY Ed LEGISLATIVE

ADDRESS _____

SIGN HERE FOR CASH RECEIVED

Please see back that all checks are properly endorsed

	DOLLARS	CENTS
CURRENCY		
CHECKS Please List Separately		
<u>2</u> <u>105</u>	<u>150</u>	
<u>2</u> <u>1153</u>	<u>700</u>	
Dallas Center		
1040 33 11/01/02		10:43 AM
DDA Deposit		
Account		
LESS 6.814%		\$3,150.00
Thank you!	TOTAL	<u>850</u>

105

JOHN NORRIS FOR CONGRESS
120 KELLOGG AVE
AMES IA 50010-3316

DATE Oct 31

PAY TO THE ORDER OF

Kelly for legislature
One hundred fifty

\$ 150

DOLLARS

Security Features Insured. Details on Back.



www.usbank.com

MEMO

⑆073000545⑆

793387440⑆0105

[Signature]

1153

EFFECTIVE GOVERNMENT COMMITTEE

NONFEDERAL IOWA
607 - 14TH ST. NW, STE. 800
WASHINGTON, DC 20005

CITIBANK, F.S.B.
WASHINGTON, DC 20036-0967
15-7011-2540

10/29/2002

PAY TO THE ORDER OF

Kelly for legislature

\$ **5,000.00

Five Thousand and 00/100

DOLLARS

MEMO

2002 Nonfederal (IA-House)

⑆001153⑆ ⑆254070116⑆

⑆15018458⑆

[Signature]

Details on back. Security Features Included.

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 05/2002)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1358
Indexed	<input checked="" type="checkbox"/>
Audited	4-28-03
Computer	WRS

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

IMPORTANT: Indicate type of committee you are reporting for: 4

(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>Joseph Kelly</u>	Political Party <u>Democrat</u>
Office Sought	District (if Senate or House)

APR 24 2003
 h.d.

[Signature] 562 992 4802 11/1/02
 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 November 1, 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
11/5/02
 County & Local Committees, enter County in which Election is held
Dallas

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.)\$ 1766.79

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 6705.00

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.....\$ 8471.79

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ... 14028.25

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)\$ -5556.46

****UNPAID BILLS** (From Schedule D - Attach Schedule D)..... SLB 182.16\$ 1607.16

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) SLB 1425.00\$ _____

****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

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)

Kelly For Legislature

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
10/20/02	ID# CK# 3362	Brian Stralks 1873 NW 89th St Cedar, IA 50325		\$ 20.00	0
10/20/02	ID# CK# 6125	John Tekippe 215 Waukele Waukele, IA 50263		100.00	0
10/19/02	ID# CK# 1196	Joseph Giudicessi 229 SE Bell Des Moines IA 50315		25.00	X
10/19/02	ID# CK# 3159	Rick Jacobsen 4522 Carpenter Ave Des Moines IA 50311		20.00	X
10/21/02	ID# CK# 047279	Robert Cox 4009 78th St Urbandale, IA 50322		20.00	X
10/21/02	ID# CK# 047281	Patrick Daughenbaugh 1855 Pleasant View Cir Des Moines IA 50320		200.00	X
10/15/02	ID# 6077 CK# 1631	Iowa Pharmacy PAC 6077 8515 Douglas, Suite 16 Des Moines, IA 50322		100.00	0
10/18/02	ID# CK# 047268	William Harbert 913 Blue St Newwalk IA 50211		100.00	0
10/19/02	ID# CK# 047276	Eduard Haase 61 NW 68th Pl Ankeny IA 50021		100.00	0
10/21/02	ID# CK# 047282	Chris Fabula 814 Aurora Des Moines 50313		40.00	0
SUB-TOTAL				\$ 725.00	
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)

Kelly For Legislature

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 FOR FUND-RAISER INCOME
10/21/02	ID# CK# 047272	Kenneth Parkins 6409 SW 17th Des Moines IA 50315		\$ 25.00	0
10/31/02	ID# Local 33 6334 CK# 1152	Phumbers / Steamfitters Political Action Fund 2551 Blue Av Des Moines IA 50321		100.00	0
10/17/02	ID# 6019 CK# 534	CWA Local 7102 - Political Action 3612 SW 9th Des Moines IA 50315		100.00	0
10/5/02	ID# CK# 10286	Marvin Shirley 1905 Lexington Rd Minburn, IA 50167		25.00	0
10/4/02	ID# CK# 3793	John Connors 1316 E 22nd St Des Moines IA 50317		25.00	0
10/27/02	ID# CK# 1176	Walter Cooper 1274 65th St WDM IA 50266		50.00	0
10/27/02	ID# CK# 910	Marilyn McManus 2109 69th Windsor Heights IA 50322		25.00	0
10/27/02	ID# CK# 8384	John McManus 2109 69th Windsor Heights 50322		10.00	0
10/20/02	ID# CK# 1052	Charles Emmell 706 S 10th Keithsburg IL 61442		10.00	0
10/23/02	ID# 8026 CK# 04713	IBEW Educational Comm 1125 15th St NW Washington DC 20005		250.00	0
SUB-TOTAL				\$ 620.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



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

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

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

Kelly for Legislature

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
✓ 10/26/02	ID# 6314 CK# 511	Local 4 Fire PAC PO Box 1821 Des Moines IA 50304		\$ 1500.00	<input type="checkbox"/>
C:K# 10/10/02	ID# CK# 1018	NE Professional Firefighters Assn Political Action Fund 409 Camel St Papillion NE 68046		250.00	<input type="checkbox"/>
10/26/02	ID# CK# 1044	James Walters 390 NE 56th Ct Pleasant Hill IA 50327		10.00	<input type="checkbox"/>
10/23/02	ID# 9098 CK# 17378	IA Democratic Party (State Act) 5461 Fleur Dr Des Moines 50321		3,000.00	<input type="checkbox"/>
✓ 10/22/02	ID# 6139 CK# 2143	United Steel Workers of Am Local 310 COPE Acct 125 NW Broadway Des Moines IA 50313		100.00	<input type="checkbox"/>
10/18/02	ID# CK# 4834	Jhurmadene Garrison 207 Whippoorwill Rd Montzuma IA 50171		15.00	<input type="checkbox"/>
10/16/02	ID# CK# 6197	Dennis Koenigsfeld 1319 - 39th St Des Moines 50311		100.00	<input type="checkbox"/>
10/20/02	ID# CK# 3971	William Cowan 2010 E Hughes Ave Des Moines IA 50322		20.00	<input type="checkbox"/>
10/23/02	ID# CK# 7335	Martin Acks 2500 E Rose Des Moines IA 50320		25.00	<input type="checkbox"/>
10/18/02	ID# CK# 1020	Steven Stoolkey 1602 Fulton Indianola IA 50125		20.00	<input type="checkbox"/>

SUB-TOTAL

\$ 5040.00

TOTAL (if last page of this schedule)

\$

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For Instructions, See Back of Form



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

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

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

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
10/27/02	ID# CK#	Howard Sloan 900 Mulberry Des Moines 50309		\$ 10.00	<input type="checkbox"/> p
	ID# CK#	Tim Morgan 25 East 1st Des Moines 50309		10.00	<input type="checkbox"/> p
	ID# CK#	Pat Crane 900 Mulberry Des Moines 50309		20.00	<input type="checkbox"/> p
	ID# CK#	Mark Dooley 1405 NW Linwood Ankeny IA 50021		5.00	<input type="checkbox"/> p
	ID# CK#	James Machamer 1120 5th ST NE WDM 50265		10.00	<input type="checkbox"/> p
	ID# CK#	Mark Smith 900 Mulberry Des Moines 50309		10.00	<input type="checkbox"/> p
	ID# CK# 2489	Dewayne Steward 620 SW Wall Des Moines 50315		20.00	<input type="checkbox"/> p
	ID# CK# 4704	Vo Anne Beckett 300- 58th ST Des Moines		20.00	<input type="checkbox"/> p
	ID# CK# 581	Dsm Retired Firefighters 300 58th ST Des Moines 50312		50.00	<input type="checkbox"/> p
	ID# CK#	Russell Roberts 3006 318th ST Turo IA 50257		10.00	<input type="checkbox"/> p
SUB-TOTAL				\$ 165.00	
TOTAL (if last page of this schedule)				\$	

CK#

* 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

Reset Form

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

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

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

Kelly for Legislature

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
10/27/02	ID# CK# 3812	John Connors 1316 E 22nd Des Moines IA 50317		\$ 25.00	<input type="checkbox"/>
	ID# CK# 5348	Gerald Beckett 300 - 58th St Des Moines 50312		20.00	<input type="checkbox"/>
	ID# CK# 2554	Betty Lawler 1701 E 28th St Des Moines 50317		20.00	<input type="checkbox"/>
	ID# CK# 1648	Krista Tanner 1654 NW 129th St Clive IA 50325		50.00	<input type="checkbox"/>
	ID# CK# 6639	Michael Morris 5508 SW 15th Des Moines IA 50315		15.00	<input type="checkbox"/>
	ID# CK# 2716	Norm Bradwick 2820 V Ave Waukee IA 50263		20.00	<input type="checkbox"/>
	ID# CK#	Michael Morris 5508 SW 15th Des Moines		15.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 155.00

TOTAL (if last page of this schedule)

\$ 670.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

Resort Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE **B**
(Rev. 09/97) MONETARY EXPENDITURES

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)
Nullis for Legislature

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
10/23/02	ID# CK# 1093	KDLS Radio Perry IA 50220	Airtime - ADS	\$ 78.75
10/24/02	ID# CK# 1094	Des Moines Register 715 Locust Des Moines 50309	Education mailing	1995.00
10/25/02	ID# CK# 1095	Des Moines Register 715 Locust Des Moines IA 50309	Mailing & Ads	6105.00
10/28/02	ID# CK# 1096	KDLS Perry IA 50220	Radio Ads	348.00
10/28/02	ID# CK# 1097	Sweetshirt by LJS Dallas Center 50003	Shirts	31.50
10/31/02	ID# CK# 1098	Des Moines Register 715 Locust Des Moines 50309	Ads	250.00
10/31/02	ID# CK# 1099	IA Democratic Party Des Moines IA	Contributor	4500.00
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 14028.25

~~10445.00~~
1995.00

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.)

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).)

