

DISCLOSURE SUMMARY PAGE

OCT 30 2002

pm 10-29

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1401
Indexed	aw e
Audited	
Computer	

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

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

Edward L. Stachowiak (319) 277-4476
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

29 OCT 02
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 29 OCT 2002 ¹¹⁻¹⁻⁰² 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 _____

Committee ID No. 1401

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.)\$ 12,228.61

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)..... 5,588.85

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.....\$ 17,817.46

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)..... 15,207.00

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).....\$ 2,610.46

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

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ 3,886.31

OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 1,000.00

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)

MURPHY FOR HOUSE

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
10/18/02	ID# CK#	<i>University of N. Iowa Cedar Falls, IA 50613</i>		\$ 113.85	
✓ 10/15/02	ID# 6113 CK# 2782	<i>AFSCME IA PEOPLE COMMITTEE 4320 NW 2ND AVE DES MOINES, IA 50313</i>		500.00	
10/17/02	ID# CK#	<i>NICO DEJONG 3422 VERALTA CEDAR FALLS, IA 50613</i>		25.00	
10/15/02	ID# CK#	<i>PAUL DUNBAR 429 BERGSTROM BLVD CEDAR FALLS, IA 50613</i>		100.00	
✓ 10/15/02	ID# 6046 CK#	<i>JUSTICE FOR ALL PAC 318 6TH AVE, SUITE 526 DES MOINES, IA 50309-4091</i>		1,000.00	
✓ 10/15/02	ID# 6084 CK#	<i>IOWA LAW STATE CAP 3330 E. 33RD ST, SUITE 10 DES MOINES, IA 50317</i>		300.00	
10/22/02	ID# CK#	<i>CATHY LIVINGSTON 39 RIVER RIDGE LANE CEDAR FALLS, IA 50613</i>		100.00	
✓ 10/18/02	ID# 6457 CK#	<i>IOWA FEDERATION OF LABOR 2000 WALKER ST, SUITE A DES MOINES, IA 50317-5290</i>		400.00	
10/19/02	ID# CK#	<i>PETER DOWNS 3221 ABRAHAM DR CEDAR FALLS, IA 50613</i>		25.00	
10/19/02	ID# CK#	<i>DON WALTON 2015 GRAND BLVD CEDAR FALLS, IA 50613</i>		50.00	
SUB-TOTAL				2,613.85	
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)

MURPHY FOR HOUSE

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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10/19/02	ID# CK#	TIM SHIELDS 64 GLEASON DR IOWA CITY, IA 52240		\$ 25.00	
✓ 10/21/02	ID# 6498 CK#	WELLPAC 636 GRAND AVENUE, STATION 13 DES MOINES, IA 50309		250.00	
✓ 10/18/02	ID# 6714 9656 CK#	EFFECTIVE GOVMT COMMITTEE NON FEDERAL IOWA 607 14TH ST NW SUITE 800 WASHINGTON, DC 20005		250.00	
10/26/02	ID# CK#	JIM CORY 916 OAK PARK CEDAR FALLS, IA 50613		50.00	
✓ 10/26/02	ID# 6107 CK#	QWEST IPAC 36107 925 HIGH STREET 959 DES MOINES, IA 50309		100.00	
✓ 10/24/02	ID# 6714 CK#	ENERGY PARTNERS PO BOX 275 GRUNDY CENTER, IOWA 50638		500.00	
✓ 10/25/02	ID# 6070 CK# 2844	IOWA LAWPAC 521 EAST LOCUST ST, FL 3 DES MOINES, IA 50309-1939		100.00	
✓ 10/25/02	ID# 6058 CK# 2167	IA CHIROPRACTIC SOCIETY PAC 1605 N, ANKENY BLVD SUITE 100 ANKENY, IA 50021-4159		200.00	
✓ 10/18/02	ID# 9657 CK#	DASH-PAC 424 C STREET NE WASHINGTON, DC 20002		500.00	
✓ 10/24/02	ID# 9656 CK#	EFFECTIVE GOVMT COMMITTEE 607 14TH ST NW SUITE 800 WASHINGTON, DC 20005		1,000.00	

SUB-TOTAL

\$

TOTAL (if last page of this schedule)

\$5,588.85

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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)
MURPHY FOR HOUSE

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
✓ 10/17/02	ID# CK#	IOWA DEMOCRATIC PARTY 5661 FLUER DES MOINES, IA 50321	MAILERS	10,000.00 \$
10/24/02	ID# CK#	MUDD GROUP 6919 CHANCELLOR CEDAR FALLS, IA 50613	RADIO SPOTS	5,000.00
10/26/02	ID# CK#	DAVE LORENSON 921 COLUMBIA DR CEDAR FALLS, IA 50613	US POSTAGE	207.00
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 15,207.00

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).)

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

SCHEDULE F (Rev. 08/96)	LOANS RECEIVED & REPAYED
<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 \$ 1,000.00

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 REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$ _____

From Schedule E -- TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,000.00

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