FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

CAMPAIGN DISCLOSURE BOARD
NOV - 1 2002
HD
FILED 862

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT

For Office Use Only
Comm. # 862
Indexed
Audited
Computer

COMMITTEE NAME (Must be same as on Statement of Organization) Myers for the 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 Slate of Candidates

SIGNATURE OF TREASURER (or person filing this report) — TELEPHONE 319 351 7794 — DATE SIGNED 30 Oct 02

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 02 (report date) REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR. 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.) ..... $ 23,793.71

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 35,050.00

Schedule F: Loans Received total (Attach Schedule F) 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....$ 58,843.71

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 45,000.00

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) ..... $ 13,843.71

UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $ 0

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $ 2000.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ___ YES ✓ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ 0

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME *(Must be same as on Statement of Organization)* Myers for the House #862

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
16 Oct 02	ID# 6146 CK# 1436	Homebuilders Assn PAC 1801 Grand Ave Des Moines Iowa 50309	None	$ 500.00	
16 Oct 02	ID# 6484 CK# 1565	Iowa Society of Anesthesiologists PAC 321 43rd St. Des Moines IA 50312-2531	none	500.00	
16 Oct 02	ID# 6034 CK# 1480	Engineers Political Action Comm. 1000 Walnut St. 102 Des Moines, IA 50309	none	400.00	
16 Oct 02	ID# 6107 CK# 3264	QWest IPAC 925 High St. Des Moines, IA 50309	none	4000.00	
16 Oct 02	ID# 6148 CK# 0532	Iron Workers local # 67 PAC - 1501 Aurora Ave Des Moines, IA 50313	None	1000.00	
16 Oct 02	ID# 6323 CK# 2751	Master Builders of Iowa PAC 221 Park St. P.O. 695 Des Moines IA 50303	None	750.00	
16 Oct 02	ID# 6498 CK# 1147	Well PAC 636 Grand Ave Stn 13 Des Moines, IA 50309	none	500.00	
16 Oct 02	ID# 6125 CK# 2088	IA. Realtors PAC 1370 NW 114th St. #100 Clive Iowa 50325	None	2000.00	
16 Oct 02	ID# 6272 CK# 209	State Police Officers Council PAC Fund - 1206 E Franklin Indianola Iowa 50125	None	50	
21 Oct 02	ID# CK# 2559	Gregory P Loeger 205 SW Westlawn Dr. Ankeny, Iowa 50021	None	50	
			SUB-TOTAL	$9750	
			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
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Myers for the House 862

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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
21 Oct 02	ID# 6082 CK# 853	Mid American Energy Co. Effective Gov't Committee 666 Grand Ave Des Moines IA 50303	none	$ 500.00	
21 Oct 02	ID# IA9664 CK# 1505	SITI PAC 300 SW 5th St. Ste 100 Des Moines, IA 50309	none	100.00	
21 Oct 02	ID# 6250 CK# 2166	Iowa Cable PAC P.O. Box 41457 Des Moines IA 50311	none	400.00	
21 Oct 02	ID# 6060 CK# 2165	Iowa Committee on Political Education AFL-CIO 2000 Walker Ste A Des Moines IA 50317	none	5000.00	
21 Oct 02	ID# 8032 CK# 015513	NRA Political Victory Fund 11250 Waples Mill Rd. Fairfax, Va 22030	non	100.00	
21 Oct 02	ID# 6160 CK# 2037	Iowa Independent Bankers PAC - 1603 22nd St. Ste 202 West Des Moines, IA 50266	none	200.00	
21 Oct 02	ID# 6475 CK# 2629	Casey's PAC P.O. Box 3001 Ankeny Iowa 50021	None	1000.00	
21 Oct 02	ID# CK# 1116	Edward J Friedmann Sr. Elizabeth Coyote P.O. Box C Red Field IA 50233	non	200.00	
21 Oct 02	ID# 8022 CK# 740	SEIU PEA International 1313 L Street NW Washington DC 20005	none	1500.00	
21 Oct 02	ID# 6294 CK# 1151	Iowa City Carpenters PAC 705 S. Clinton St. Iowa City Iowa 52240	none	500.00	
			SUB-TOTAL	$ 9500	
			TOTAL *(if last page of this schedule)*	$	

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For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME *(Must be same as on Statement of Organization)* Myers for the House #862

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
23 Octor	ID# CK# 1035	Capital Consultant Brian Johnson 6824 Panorama Dr. Panora Iowa 50216	None	$ 200.00	
23 Oct 02	ID# 8000 CK# 1344	AT+T PAC NorWest Emp Funds 1875 Lawrence St Rm 1575 Denver Co 80202	none	250.00	
23 Oct 02	ID# 6498 CK# 1159	Well PAC 636 Grand Av Stn 13 Des Moines, Iowa 50309	None	500.00	
23 Oct 02	ID# 6282 CK# 1222	HyVee Employee PAC 5820 Westown Parkway West Des Moines, Iowa 50266	None	1000.00	
23 Oct 02	ID# 862 CK# 1151	Grocers Political Action Committee 2540 106th St. Ste 102 Des Moines, IA 50322	None	1000.00	
27 Oct 02	ID# 6098 CK# 3233	Iowa BeV PAC 310 Northwestern Bldg 321 E Walnut Des Moines IA 50309	None	400.00	
27 Oct 02	ID# 6279 CK# 2039	Iowa Opthalmology PAC 1501 50th Street Ste 133 West Des Moines, IA 50266	None	1000.00	
27 Oct 02	ID# 6078 CK# 1467	Iowa Physical Therapy PAC 1228 8th St. Ste 106 West Des Moines, IA 50265-2624	None	250.00	
27 Oct 02	ID# 6058 CK# 2219	Iowa Chiropractic Soc. PAC 1605 N Ankeny Blvd Ste 100 Ankeny Iowa 50021-4459	None	700.00	
27 Oct 02	ID# 8278 CK# 1114	BACK PAC Non-Fed Iowa 2141 N. 121st Street Omaha, Nebr 68164	None	10,000.00	
			SUB-TOTAL	$5,300	
			TOTAL *(if last page of this schedule)*	$	

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
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COMMITTEE NAME *(Must be same as on Statement of Organization)*: Myers for the House 862

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
2/01/01	ID# 6109 CK# 3067	Wells Fargo State PAC-IA 666 Walnut Street Des Moines, Iowa 50304	none	$ 500.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	$ 500.00	
			TOTAL *(if last page of this schedule)*	$	

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FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE **B** (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

COMMITTEE NAME *(Must be same as on Statement of Organization)*: Myers for the House #862

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
M Oct 02	ID# CK# 1191	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321	Contribution	$30,000.
23 Oct 02	ID# CK# 1192	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321	Contribution	15,000.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$45,000.00
			TOTAL (*if last page of this schedule*)	$45,000.00

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).)

SCHEDULE F (Rev. 08/96)	LOANS RECEIVED & REPAID

☐ CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Myers for the House 862

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
	Richard E Myers Woodland Hts IA City IA 52240	Candidate	$ $2000.00

TOTAL *(PART I)* $ 2000

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 $ 2000.00

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