

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

NOV - 4 2002

<b>FORM DR-2</b> (Rev. 05/2002)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	<u>1356</u>
Indexed	<u>2</u>
Audited	_____
Computer	_____

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

IMPORTANT: Indicate type of committee you are reporting for:  (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>HERMAN QUIRMBACH</u>	Political Party <u>DEMOCRAT</u>
Office Sought <u>STATE SENATE</u>	District (if Senate or House) <u>23</u>

SOE Pawenscroft  
SIGNATURE OF TREASURER (or person filing this report)

515 2680294  
TELEPHONE

10/29/02  
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 late 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 _____
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.) .....\$ 30,087.05

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 6525.00

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

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... NONE

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 36,612.05

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ... 25,952.95

Schedule F: Loan Repayments total (Attach Schedule F) ..... 0

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) .....\$ 10,659.10

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$ NONE

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....\$ 9643.31

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 21,000

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?) \_\_\_\_\_ YES  NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ NONE

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

*Quirmbach for Senate*

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#	Susan Gianosa & Mark Steinberg 2155 Carrington Drive Brookfield WI 53045		\$ 50.00	
	ID# CK#	John & Greta Lens 1104 Roosevelt Ames IA 50010		25.00	
	ID# 6086 CK# 12821	ISEA - PAC 777 3rd St. DM IA 50309		1000.00	
	ID# CK#	Jeannette Bohnenkamp 2222 Barr Ames IA 50010		40.00	
10/18/02	ID# CK#	Arleen Faith 321 Hilltop Ames IA 50014		10.00	
	ID# CK#	LISA Hein 212 E. 7th St. Ames IA 50010		50.00	✓
	ID# CK#	Eino Kainlauri 3604 Ross Road Ames IA 50014		20.00	
	ID# CK#	Douglas & Wanda McCay 5500 240th St. Ames IA 50014		200.00	
10/22/02	ID# CK#	Helen & Rudy Jensen 929 Brookridge Ames IA 50010		20.00	✓
11	ID# CK#	George & Dorothy Kizer 3919 Dawes Ames IA 50010		150.00	✓
SUB-TOTAL				\$1515.00	
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 <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

*Quirmbach for Senate*

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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
<i>10/23/02</i>	ID# CK#	<i>Unitemized contributions</i>		<i>\$ 10-</i>	
<i>"</i>	ID# CK#	<i>Patricia &amp; Therese Holbar 3211 Kirgmar Ames IA 50014</i>		<i>100-</i>	
<i>"</i>	ID# CK#	<i>Elizabeth Mayfield 1801 20th St. Apt E13 Ames IA 50010</i>		<i>25-</i>	
<i>✓</i>	ID# <i>6019</i> CK# <i>0557</i>	<i>CWA LOCAL 7103 - PAC 3612 SW 9th St. DM IA 50315</i>		<i>200-</i>	
<i>✓</i>	ID# <i>9656</i> CK# <i>1038</i>	<i>EFFECTIVE GOVT. COMMITTEE 607 14th St. NW Suite 800 WASH DC 20005</i>		<i>2000-</i>	
<i>✓</i>	ID# <i>6118</i> CK# <i>1882</i>	<i>IA. OPTOMETRIC ASSN PAC 1454 30th SUITE 204 W. Des Moines IA 50266</i>		<i>150-</i>	
<i>✓</i>	ID# <i>6077</i> CK# <i>1630</i>	<i>IA PHARMACY PAC 8515 DOUGLAS SUITE 16 DM IA 50322</i>		<i>100-</i>	
<i>✓</i>	ID# <i>6078</i> CK# <i>1448</i>	<i>IA PHYSICAL THERAPY 1228 8th SUITE 106 W. D.M. IA 50265</i>		<i>100-</i>	
<i>✓</i>	ID# <i>6488</i> CK# <i>1100</i>	<i>IA. PROVIDERS PAC 7025 HICKMAN SUITE 5 URBANDALE IA 50322</i>		<i>100-</i>	
<i>✓</i>	ID# <i>6378</i> CK# <i>1124</i>	<i>I-VET PAC 5921 FLEUR DR DM IA 50321</i>		<i>200-</i>	
SUB-TOTAL				<i>\$ 2985.00</i>	
TOTAL (if last page of this schedule)				<i>\$</i>	

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For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

*Quirmbach for Senate*

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
✓ 10/23/02	ID# 6498 CK# 1165	WELL PAC 636 Grand Ave. Station 13 Dm IA 50309		\$ 250-	
10/26/02	ID# CK#	Brian & Elaine Anderson 57000 245th Ames IA 50010		50-	
"	ID# CK#	Paul Beck + Sara Chasman 4056 Stansbury Ave Sherman Oaks CA 91423		1000-	
"	ID# CK#	Doris Fozu 1006 Arizona Ames 50014		25-	✓
✓ "	ID# 6058 CK# 2155	IOWA CHIROPRACTIC PAC 1605 N. Anthony Blvd STE 100 Anthony IA 50021		250-	
✓	ID# 8026 CK# 4746	IBEW PAC 1125 15th ST N.W. WASH DC 20005		250-	
10/29/02	ID# CK#	Jan & Cornelia Flora 1902 George Allen Ames IA 50010		200-	✓
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$2025  
\$6525

TOTAL (if last page of this schedule)

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
*Quirmbach for Senate*

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# 202	IA DEMOCRATIC TRUMP FUND 5661 FLEWR DR. D.M. IA 50321	Contribution	\$15,000.00
10/21/02	ID# CK# 203	COPYWORKS 105 WELCH AVE Ames IA 50014	COPY OF REPORT	8.44
10/21/02	ID# CK# 204	US POSTMASTER WELCH AVE STATION Ames IA 50014	POSTAGE TO MAIL REPORT	1.52
10/22/02	ID# CK# 205	ISU DAILY HAMILTON HALL, ISU Ames IA 50011	Advertising	864.50
10/22/02	ID# CK# 206	STACY W. DEMS P.O. Box 1256 Ames IA 50014	To reimburse for ads in Ames Tribune	2894.20
10/24/02	ID# CK# 207	KASTI 415 MAIN ST Ames IA 50010	Radio ads	1000.50
10/27/02	ID# CK# <del>241</del> 241	US POSTMASTER MADRID IA 50156	STAMPS	37.00
10/28/02	ID# CK# 149	Rebecca Poore 804 W 2nd MADRID IA 50156	Reimbursement for stamps	37.00
SUB-TOTAL				\$19,842.71
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**

SCHEDULE <b>B</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)  
**QUIRMBACH FOR SENATE**

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
10/15/02	ID# CK# 252	POSTMASTER UNION STATION AMES IA 50014-9997	STAMPS	\$370.00
10/22/02	ID# CK# 253	STAPLES 906 East First St. Ankeny IA 50021	Return address mailing label blanks	29.66
10/25/02	ID# CK# 254	STAPLES 1333 Buckeye Rd Ames IA 50010	Diskettes for auditor	10.58
✓ 10/25/02	ID# CK# 209	IA DEMOCRATIC TRUMAN FORD 5361 FLEUR DRIVE DM IA 50321	CONTRIBUTION	5700.00
	ID# CK#			

SUB-TOTAL \$110.24  
TOTAL (if last page of this schedule) \$5952.95

**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)(f).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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

SCHEDULE <b>E</b> (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
✓ 10/21/02	IOWA DEMOCRATIC PARTY 5661 FLEUR DRIVE Dm IA 50321 (9048)		POSTAGE & MAIL PRODUCTION	\$ 5052.63	
✓ 10/23/02	IOWA DEMOCRATIC PARTY 5661 FLEUR DRIVE (9048) Dm IA 50321		POSTAGE & MAIL PRODUCTION	4587.68	
VARIOUS	SUE RAVENSCROFT 455 WESTWOOD Ames IA 50014		USE OF PERSONAL PHONE & COPIES	3.00	

SUB-TOTAL \$ 9643.31  
 TOTAL (if last page of this schedule) \$ 9643.31

SCHEDULE <b>F</b> (Rev. 08/96)	<b>LOANS                  RECEIVED                  &amp; REPAID</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Quirnbach for Senate

**NOTE:** This schedule reports money loaned to the committee which is deposited in the committee account.

**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD** \$ 21,000

**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.)

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
 (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$
/			

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$
/			

TOTAL (PART I) \$ \_\_\_\_\_

TOTAL CASH REPAYMENTS (PART II) \$ 0  
 From Schedule E - TOTAL LOANS FORGIVEN \$ 0  
**TOTAL OUTSTANDING LOANS END OF REPORT PERIOD** \$ 21,000

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