

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE**

**Report Form**

<b>FORM DR-2</b> (Rev. 05/2002)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1417
Indexed	e 9
Audited	
Computer	WRS WRS

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 Pence Snetizer for Senate

**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:**

<b>Candidate Name</b> Pence V. Snetizer	<b>Political Party</b> Democrat
<b>Office Sought</b> State Senate	<b>District (if Senate or House)</b> 19

JUN 3 002003 4 0002  
 7:57 am fax  
 AM 6-28

See signed letter filed with amendments **NATURE 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:**

FILED A Supplemental October 11-1-02 REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR.  
 (report date) filed 11-4-02 Indicate one  1

CHECK IF AMENDMENT TO REPORT DATED And amended 6-17-03

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.) 313,015.66

**ADD TOTAL MONEY TAKEN IN THIS PERIOD** s/b 24,090.00  
 Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below) .....  
 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** ..... \$

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ...  
 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) ..... s/b 16,882.69

**UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ 0.00  
**IN-KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 0.00  
**OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ 0.00

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?)  YES  NO  
**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) ..... \$ 0.00

14716.65  
~~15043.06~~  
~~15,081.66~~ s/b 15,080  
~~25,225.00~~ 24090  
 0.00  
 0.00  
 38,806.65  
~~40,306.66~~ 39,133  
~~22,388.87~~ 22622.54  
 0.00  
 16184.11  
~~18,017.79~~ 16844.13

FOR INSTRUCTIONS, SEE BACK OF FORM

### DISCLOSURE SUMMARY PAGE

Market Forum

<b>FORM DR-2</b> (Rev. 05/2002)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1417
Indexed	9-28-02
Audited	7-28-02
Computer	WRS

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Renee Sncitzer 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  
 County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee  
 Support State of Candidates

**CANDIDATE COMMITTEES ONLY:**

Candidate Name Renee V. Sncitzer	Political Party Democrat
Office Sought State Senate	District (if Senate or House) 19

*See amended report*

NOV - 4 2002  
7:57 am fax

**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:**

FILING A Supplemental October 11-1-02 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate one  1

CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

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.)

#### STATEMENT OF CASH ON HAND

<b>CASH ON HAND</b> at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount <b>MUST</b> 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.)	15,081.66
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	25,225.00
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<b>(Schedule H applies to Candidates' Committees Only)</b>	
<b>SUB-TOTAL</b> .....	\$ 40,306.66
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	22,288.87
Schedule F: Loan Repayments total (Attach Schedule F)	0.00
<b>CASH ON HAND</b> at the end of this reporting period (If final report, balance must be zero) (Attach DR-3)	\$ 18,017.79

<b>UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$ 0.00
<b>IN-KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$ 0.00
<b>OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$ 0.00

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?)  YES  NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \$ 0.00

8375 2278 5164

FOR INSTRUCTIONS, SEE BACK COVER FORM

DISCLOSURE SUMMARY PAGE

Reset Form

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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Renee Sneitzer for Senate

**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

**CANDIDATE COMMITTEES ONLY:**

Candidate Name Renee V. Sneitzer	Political Party Democrat
Office Sought State Senate	District (if Senate or House) 19

NOV - 5 2002  
FILED Fed Ex

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 Supplemental October REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.  
(report date) Indicate one  1

CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

Local Committees, enter Date of Election \_\_\_\_\_

County & Local Committees, enter County in which Election is held \_\_\_\_\_

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.)

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.) *5/13 15,081.66* \$ 15,081.66

**ADD TOTAL MONEY TAKEN IN THIS PERIOD** *5/13 24,090.00*

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) .....	25,225.00
Schedule F: Loans Received total (Attach Schedule F) .....	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....	0.00

**(Schedule H applies to Candidates' Committees Only)**

**SUB-TOTAL.....\$** 40,306.66

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ...	22,288.87
Schedule F: Loan Repayments total (Attach Schedule F) .....	0.00

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) *5/13 16,881.69* \$ 18,017.79

<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D) .....	\$ 0.00
<b>**IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	\$ 0.00
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F) .....	\$ 0.00

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?)  YES  NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \$ 0.00

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE**



<b>FORM DR-2</b> (Rev. 05/2002)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1417
Indexed	e 2
Audited	
Computer	WRS

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 Renee Snetizer for Senate

**IMPORTANT:** Indicate type of committee you are reporting for:  **JUN 17 2003**  
 (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 *pin Uley*

**CANDIDATE COMMITTEES ONLY:**

**Candidate Name:** Renee V. Snetizer  
**Political Party:** Democrat  
**Office Sought:** State Senate  
**District (if Senate or House):** 19  
*See attached report*

NOV - 4 2002  
 7:57 am fax

**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:**

**FILED** A Supplemental October 11-1-02 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate one

CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

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.)

**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.) *slb 15,050* \$ 15,043.06

**ADD TOTAL MONEY TAKEN IN THIS PERIOD** *slb 24,090.00*

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below) ..... \$ 25,225.00 **24090**

Schedule F: Loans Received total (Attach Schedule F) ..... \$ 0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... \$ 0.00

**(Schedule H applies to Candidates' Committees Only)**

**SUB-TOTAL** ..... \$ 40,306.66 **39,133**

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ... \$ 22,288.87

Schedule F: Loan Repayments total (Attach Schedule F) ..... \$ 0.00

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) *slb 16,883.69* \$ 18,017.79 **16844.13**

**UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ 0.00

**IN-KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 0.00

**OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ 0.00

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?)  YES  NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \$ 0.00

For Instructions, See Back of For...

Reset Form

SCHEDULE <b>A</b> (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)  
Renee Snetzer 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
10/16/02	ID# CK#	Frieda Long 1028 12th Ave SE Cedar Rapids, IA 52402		\$ 50.00	<input type="checkbox"/>
10/19/02	ID# CK#	Josephine Fletchall 1614 Kantor Ave Webster City, IA 50595		10.00	<input type="checkbox"/>
10/19/02	ID# CK#	Mary Jo Johnson 1707 Clark Ames, IA 50010		20.00	<input type="checkbox"/>
✓ 10/19/02	ID# <u>6369</u> CK# <u>        </u>	DAWN's List 4720 Westwood Dr West Des Moines, IA 50265		125.00	<input type="checkbox"/>
10/19/02	ID# CK#	Karen Thomsen 66757 680th St Cumberland, IA 50843		25.00	<input type="checkbox"/>
10/19/02	ID# CK#	Linda Lucy 783 Fenelon Pl Dubuque, IA 52001		25.00	<input type="checkbox"/>
10/19/02	ID# CK#	Jane Zaring 1955 Meadow Glen North Ames, IA 50014-8378		25.00	<input type="checkbox"/>
10/19/02	ID# CK#	Susan Ryan-Anderson 3219 Beaver Ave Des Moines, IA 50310		25.00	<input type="checkbox"/>
10/19/02	ID# CK#	Victoria Herring 4331 Greenwood Dr, Suite 100 Des Moines, IA 50312		50.00	<input type="checkbox"/>
10/19/02	ID# CK#	Elaine Hughes 701 E. Lowe Ave Fairfield, IA 52556		50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 405.00

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...

Reset Form

SCHEDULE <b>A</b> (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)  
Renee Sneytzer 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
10/19/02	ID# CK#	Michael Coyle 200 Security Bldg, Suite 200 Dubuque, IA 52001		\$ 50.00	<input type="checkbox"/>
10/19/02	ID# CK#	Betty Christiansen 4516 70th St Des Moines, IA 50322		50.00	<input type="checkbox"/>
10/19/02	ID# CK#	Elaine Szymoniak 2116 44th St Des Moines, IA 50310		50.00	<input type="checkbox"/>
10/19/02	ID# CK#	Susan Terry Knapp 1610 Burr Oaks Dr West Des Moines, IA 50266		50.00	<input type="checkbox"/>
10/19/02	ID# CK#	Paulee Lipsman 2880 Grand Ave. #106 Des Moines, IA 50312		50.00	<input type="checkbox"/>
10/19/02	ID# CK#	Ruth Swenson 2102 Kildee St Ames, IA 50014		50.00	<input type="checkbox"/>
10/19/02	ID# CK#	Julia Faltison Anderson 2424 Hamilton Dr Ames, IA 50014		50.00	<input type="checkbox"/>
10/19/02	ID# CK#	Martha Anderson 937 37th St Des Moines, IA 50312		100.00	<input type="checkbox"/>
10/19/02	ID# CK#	Barbara Boatwright 2331 East 39th Court Des Moines, IA 50317		100.00	<input type="checkbox"/>
10/19/02	ID# CK#	Elizabeth Garst 1313 Fig Ave Coon Rapids, IA		100.00	<input type="checkbox"/>

\* 11/2 Dep

per fees

SUB-TOTAL

\$ 650.00  
\$

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 For...

Reset Form

SCHEDULE <b>A</b> (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)  
Renee Snetzer 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
10/19/02	ID# CK#	Doris Jean Newlin 3315 48th Pl Des Moines, IA 50310		\$ 200.00	<input type="checkbox"/>
10/19/02	ID# CK#	Shirley K. McAdon 1305 S. 15th Adel, IA 50003		100.00	<input type="checkbox"/>
10/21/02	ID# CK#	Nancy Evans 2336 Linden Dr. SE Cedar Rapids, IA 42403		200.00	<input type="checkbox"/>
10/16/02	ID# 8228 CK# 0012146	CWA - COPE 501 3rd Street NW Washington, DC 20001		100.00	<input type="checkbox"/>
10/19/02	ID# 6406 CK# 1029	Emily's List 805 15th St. NW Washington, DC 20005		1,000.00	<input type="checkbox"/>
10/16/02	ID# CK#	Vernon E. Jordan 1333 New Hampshire Ave, NW, Suite 400 Washington, DC 20036		500.00	<input type="checkbox"/>
10/16/02	ID# 8125 CK# 9656 1042	Effective Government Committee 607 14th St NW Suite 800 Washington, DC 20005		1,500.00	<input type="checkbox"/>
10/16/02	ID# 9098 CK# 17344	Iowa Democratic Party 5661 Fluor Dr Des Moines, IA 50321		2,500.00	<input type="checkbox"/>
10/21/02	ID# 6113 CK# 1905 8019	American Federation of State, County, and Municipal Employees 1625 L St NW Washington, DC 20036 PEOPLE		15,000.00	<input type="checkbox"/>
10/23/02	ID# 6406 CK# 1032	Emily's List 805 15th St, NW, Suite 400 Washington, DC 20005		750.00	<input type="checkbox"/>

SUB-TOTAL

\$ 21,850.00

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

Reset Form

<b>SCHEDULE</b> <b>A</b> (Rev. 06/97)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)  
 Renee Snetzer 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
10/25/02	ID# CK#	Sally Pederson 5007 Woodland Des Moines, IA 50312		\$ 250.00	<input type="checkbox"/>
10/25/02	ID# CK#	John W. Rogers, Jr. 200 E Randolph Dr. Chicago, IL 60601		500.00	<input type="checkbox"/>
10/25/02	ID# CK#	Pyr and Mona Knoll 740 E. Post Ct SE Cedar Rapids, IA 52403		50.00	<input checked="" type="checkbox"/>
10/24/02	ID# CK#	Richard and Wanda Sellers 2900 Glass Rd NE Cedar Rapids, IA 52402		200.00	<input type="checkbox"/>
10/25/02	ID# CK#	Mervin Cronbaugh 4417 Ozark St NE Cedar Rapids, IA 52402		20.00	<input checked="" type="checkbox"/>
10/25/02	ID# CK#	William Lawrence 264 12th St NW Cedar Rapids, IA 52405		20.00	<input checked="" type="checkbox"/>
10/25/02	ID# CK#	Marlene Hill 4525 Willowbrook Dr NE Cedar Rapids, IA 52411		20.00	<input checked="" type="checkbox"/>
10/25/02	ID# CK#	Mary Landis 1410 32nd St NE, #C-1 Cedar Rapids, IA 52402		25.00	<input checked="" type="checkbox"/>
10/25/02	ID# CK#	Rosemary Bowers 3526 Wenig Rd NE Cedar Rapids, IA 52402		25.00	<input checked="" type="checkbox"/>
10/25/02	ID# CK#	Richard and Dee Pitner 410 19th St NE Cedar Rapids, IA 52402		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1135.00	✓
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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

**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)  
Renee Snetzer for Senate

*Renee Snetzer*

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#	Brendan Greiner 421 N. Pleasant Hill Blvd. Des Moines, IA 50327	Reimbursement for overnight charge	\$ 11.33
10/17/02	ID# CK#	Mailing Services 200 50th Ave Dr SW Cedar Rapids, IA 52402	Bulk Mailing Charge	122.54
10/21/02	ID# 9098 CK# 1072	Senate Truman Fund 5661 Fluer Drive Des Moines, IA 50321	Contribution	22,155.00
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 22,288.87</b>

**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

Reset 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>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
<input checked="" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Renee Snetzer 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# 1070	Brendan Greiner 421 N. Pleasant Hill Blvd. Des Moines, IA 50327	Reimbursement for overnight charge <i>previously reported</i>	<del>11.35</del>
10/17/02	ID# CK# 1071	Mailing Services 200 50th Ave Dr SW Cedar Rapids, IA 52402	Bulk Mailing Charge	122.54
✓ 10/21/02	ID# CK# 1072	Senate Truman Fund 5661 Fluor Drive Des Moines, IA 50321	Contribution	22,500 <del>22,155.00</del>
	ID# CK#			

SUB-TOTAL \$ 22,622.54  
TOTAL (if last page of this schedule) \$ ~~22,600.87~~

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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).)