

**DISCLOSURE SUMMARY PAGE**

**FORM DR-2**  
(Rev. 01/98)

**DISCLOSURE REPORT**

NOV - 1 2002

COMMITTEE NAME (Must be same as on Statement of Organization) pm 10-30  
STEVE SWANSON CAMPAIGN COMMITTEE **FILED**

**For Office Use Only**

Comm. # 1479

Indexed S

Audited \_\_\_\_\_

Computer \_\_\_\_\_

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

Thomas Bengt 563 332 5758  
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

Oct 29, 2002  
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 Oct 29 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  
Nov 5 2002

County & Local Committees, enter County in which Election is held  
Scott

**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.) .....\$ 5248.08

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ..... 3075.00

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.....\$** 8318.08

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ..... 7627.54

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) .....\$ 6905.4

**UNPAID BILLS** (From Schedule D - Attach Schedule D) .....\$ 5592.10

**IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) .....\$ 0

**OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) .....\$ 0

**CANDIDATE COMMITTEES ONLY:**

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

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

**CONTRIBUTIONS - MONEY TAKEN IN**  
(Including candidate's personal funds)

<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)  
STEVE SWANSON CAMPAIGN COMMITTEE

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
9/13	ID# CK# 1175	JEFFREY GOLDSTEIN 2117 STATE ST BETTENDORF, IOWA 52722		\$ 150	
9/13	ID# CK# 1207	BERNARD GOLDSTEIN 2117 STATE ST BETT. IA 52722		250	
9/30	ID# CK# 4195	CECILIA TOMLENVIC 1245 40TH ST DES MOINES, IA, 50311		25	
10/1	ID# CK# 1683	SUE ZUBER 2810 W 1ST ST ANKENY, IA, 50021	SISTER	50	
10/10	ID# CK# 422	BARNEY MURPHY 307 N. 11TH ST DUNLAP, IA, 51559		50	
9/13	ID# CK# 1183	ROBERT GOLDSTEIN 2117 STATE ST BETT. IA 52722		100	
10/1	ID# 6025 CK# 548	DISTRICT UNION 431 UFEW 1401 W. 3RD ST DAVENPORT, IA, 52802		500	
10/10	ID# CK# 5559	PATRICIA ZAMORA 4835 W LOCUST ST DAVENPORT, IA, 52804		50	
10/17	ID# CK# 2255	DONALD ZIMMERMAN 1011 W. 16TH ST DAVENPORT, IA, 52804		100	
10/17	ID# CK# 522	DAVID SWANSON 2835 EASTWOOD DR IOWA CITY, IA 52245		500	
SUB-TOTAL				\$ 1775	
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.

**CONTRIBUTIONS – MONEY TAKEN IN**  
(Including candidate's personal funds)

<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)  
STEVE SWANSON CAMPAIGN COMMITTEE

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/YY)	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
10/17/02	ID# CK# 307862	MICHAEL MAHLER 28041 230TH ST LECLAIRE, IA 52753		\$100	
10/18	ID# CK# 6628	DONALD STURGELL 1137 22ND ST MOLINE, ILL 61965		50	
10/21	ID# CK# 3822	CONNIE ROBBINS GULL 306 CEDAR ST ELKHADER 52043		100	
✓ 10/20	ID# 8262 CK# 1521	BRIDGE STRUCTURAL ORNAMENTAL IRONWORKERS LOCAL 11 8000 29TH ST WEST ROCK ISLAND, ILL 61201		500	
10/25	ID# CK# 6136	MARK HENDERSON 4 MANOR DR C-L ELDRIDGE, IA 52748		20	✓
10/25	ID# CK# 5834	DAWN WARDLOW 5660 DODDS DR BETTENDORF, IA 52722		40	✓
10/25	ID# CK# 3004	MIKE ERNSTER 2303 KINSWAY DR BETTENDORF, IA 52722		200	✓
10/25	ID# CK# 5834	KARL RUMBERG 3330 TREMONT DAVENPORT, IA 52805		25	✓
10/25	ID# CK# 9295	SUSAN TAMPERIN 2718 COLLEGE DAVENPORT, IA 52803		100	✓
10/25	ID# CK# 2360	THOMAS ENGELMAN 4552 MAIN ST DAVENPORT, IA 52806		50	✓

SUB-TOTAL  
\$ 1185

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.

**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

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

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

**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
	ID# CK# <i>2659</i>	<i>MICHAEL ISBELL 4530 ASPEN HILLS CIRCLE BETTENDORF, IA 52722</i>		<i>\$ 25</i>	<input checked="" type="checkbox"/>
	ID# CK# <i>CASH</i>	<i>JORGE GOMEZ 2322 E KIMBERLY DAVENPORT, IOWA 52817</i>		<i>40</i>	<input checked="" type="checkbox"/>
	ID# CK# <i>4303</i>	<i>THOMAS BENGE 6974 VALLEY BETTENDORF</i>		<i>50</i>	<input checked="" type="checkbox"/>
	ID# CK#				
<b>SUB-TOTAL</b>				<i>\$ 115</i>	
<b>TOTAL (if last page of this schedule)</b>				<i>\$ 3075</i>	

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

**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 AC 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 type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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# 1003	Steve Swanson 4555 Aspen Hill Cir. Bettendorf, Ia 52722	Photos, copies, stamps brochures, maps, and office supplies	\$ 886.28
10/15	ID# CK# 1005	Quad City Press 1325 15th ST Moline, Ill 61205	Flyers	1444.50
10/15	ID# CK# 1006	Scott County Democrats P.O. Box 2009 Davenport, Iowa 52809	Office rent	200
10/30	ID# CK# 1007	Steve Swanson 4550 ASPEN HILL CIRCLE BETTENDORF, IA 52722	Postage	222
10/20	ID# CK# 1008	Bettendorf J.C. Holloway DEVILS GLEN PARK BETTENDORF, IA 52722	Parade ENTRY FEE	10
10/21	ID# CK# 1009	JV Consulting 2100 3RD AVE ROCK ISLAND, ILL 61201	BROCHURE MAILING #1	1592.73
10/25	ID# CK# 1010	JV Consulting 2100 3RD AVE ROCK ISLAND, ILL 61201	BROCHURE MAILING #2	1592.73
10/29	ID# CK# 1011	JV CONSULTING 2100 3RD AVE ROCK ISLAND ILL 61201	BROCHURE MAILING #3	1589.30
SUB-TOTAL				\$ 7537.54
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**

<b>SCHEDULE</b> <b>B</b> (Rev. 09/97)	<b>MONETARY</b> <b>EXPENDITURES</b>
<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)

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
10/29/02	ID# CK# 1012	BETTENDORF NEWS PO. Box 460 BETTENDORF, IA 52722	NEWSPAPER AD	\$ 90
	ID# CK#			
<b>SUB-TOTAL</b>				\$ 90
<b>TOTAL (if last page of this schedule)</b>				\$ 7627.54

**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).)

<b>SCHEDULE D</b> (Rev. 06/98)	<b>INCURRED</b> <b>INDEBTEDNESS</b>
	<input type="checkbox"/> <b>CHECK THIS BOX</b> <b>IF AMENDING</b> <b>FORM</b>

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

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD**  
**(DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
9/19/02	CARTER PRINTING 1739 GRAND AVE DES MOINES, IA 50316	YARD SIGNS	\$ 1101.00
10/20	QUAD CITY PRESS 1325 15TH ST MOLINE, ILL 61205	BROCHURE PRINTING	4120.00
10/27	STEVE SWANSON 4555 ASPEN HILLS CIRCLE BETT. IA 52722	PARADE CANDY	71.99
10/27	STEVE SWANSON 4555 ASPEN HILLS CIRCLE BETT. IA 52722	POSTAGE	74.00
10/25	CHRIS & AMY KARNAVAS 5150 FOX RIDGE RD BETTENDORF, IA 52722	FUND RAISER FOOD & DRINKS	225.11
SUB-TOTAL			\$ 5592.10
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 5592.10

\* actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**  
 \*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.