

DISCLOSURE SUMMARY PAGE

| | |
|------------------------------------|--------------------------|
| FORM DR-2 (Rev. 05/2002) | DISCLOSURE REPORT |
| For Office Use Only | |
| Comm. # | <u>1316</u> |
| Indexed | <u>e</u> |
| Audited | _____ |
| Computer | _____ |

COMMITTEE NAME (Must be same as on Statement of Organization)
Gifford for Iowa 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: Charles Gifford Political Party: Democrat
 Office Sought: State Senator District (if Senate or House): 31

Charles Gifford
 SIGNATURE OF TREASURER (or person filing this report)

382-3191
 TELEPHONE

MAY 31 2002
5/29/02
 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 5/28/2002 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.)\$ 11,570.86

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 11,320.00

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.....\$ 22,890.86

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) ... 18,332.91

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)\$ 4,557.95

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

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)\$ 3000.00

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

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)

Gifford for Iowa 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 |
|---------------------------------------|--|--|--|-----------------|-----------------------------|
| 5/23/02 | ID# CK# 6542 | Chuck and Linda Gifford 1402 Lewis Des Moines, IA 50315 | Candidate and spouse | \$ 2000.00 | |
| 5/23/02 | ID# CK# cash | Lori Hayes Creston, IA | | 20.00 | |
| 5/23/02 | ID# CK# cash | Von Witzg Webster City, IA | | 20.00 | |
| 5/23/02 | ID# CK# 9487 | Jean Haugland 6750 School St. Unit 1402 Des Moines, IA 50311 | | 500.00 | |
| 5/23/02 | ID# CK# 9833 | Addison Parker 2909 Woodland Ave #615 Des Moines, IA 50312 | | 25.00 | |
| 5/23/02 | ID# CK# 7567 | Jane Ann Youngerman Parker 2909 Woodland Ave #615 Des Moines, IA 50312 | | 25.00 | |
| 5/23/02 | ID# 6084 CK# 561 | UAW Region 4 2700 S River Rd., Suite 200 Des Plaines, IL 60018 | | 7500.00 | |
| 5/23/02 | ID# 6139 CK# 2100 | USWA Local 310 Lope Act 125 NW Broadway Des Moines, IA 50313 | | 500.00 | |
| 5/28/02 | ID# CK# 8204 | Charles Hanson 300 Walnut #5 Des Moines, IA 50309 | | 100.00 | |
| 5/28/02 | ID# CK# 3894 | Marilyn or Ben Stone 3816 Franklin Ave Des Moines, IA 50310 | | 40.00 | |
| SUB-TOTAL | | | | \$10,730.00 | |
| 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

| | |
|---|----------------------|
| SCHEDULE A (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)

Gifford for Iowa Senate

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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 |
|---------------------------------------|--|--|--|-----------------|-----------------------------|
| 5/28/02 | ID# CK# 3263 | Philip or Diana Sickles 4328 Woodland Des Moines, IA 50312 | | \$ 50.00 | |
| 5/28/02 | ID# CK# 1464 | Marjory Barnes 2026 Woodland Ave West Des Moines, IA 50265 | | 40.00 | |
| 5/28/02 | ID# CK# 1265 | Janet or Arthur Hedberg 1716 E 31st Court Des Moines, IA 50317 | | 500.00 | |
| | ID# CK# | | | | |
| SUB-TOTAL | | | | \$ 590.00 | |
| TOTAL (if last page of this schedule) | | | | \$ 11,320 | |

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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)
Gifford For Iowa 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 |
|---------------------------------------|--|--|----------------------------------|-----------------|
| 5/15/02 | ID# CK# 1107 | U.S. Postal Service 1165 2nd Ave Des Moines, IA 50318 | Postage | \$ 102.00 |
| 5/16/02 | ID# CK# 1108 | Mike Kiernan 839 41st St Des Moines, IA 50312 | Reimbursement for Video Tapes | 68.90 |
| 5/21/02 | ID# CK# 1109 | KCCI TV 888 9th St. Des Moines, IA 50309 | Initial Commercial Buy | 8415.00 |
| 5/22/02 | ID# CK# 1110 | U.S. Postal Service 1165 2nd Ave Des Moines, IA 50318 | Postage | 102.00 |
| 5/22/02 | ID# CK# 1111 | U.S. Postal Service 1165 2nd Ave Des Moines, IA 50318 | Brochure Mailing | 1374.70 |
| 5/23/02 | ID# CK# 1112 | Carter Printing 1739 E. Grand Ave Des Moines, IA 50316 | Brochure Printing | 2350.02 |
| 5/23/02 | ID# CK# 1113 | Shelly Cosgrove 7208 SW 17th Des Moines, IA 50315 | Canvassing | 270.00 |
| 5/23/02 | ID# CK# 1114 | Time Frame Production 1430 Locust Des Moines, IA 50309 | Commercial Production | 1800.00 |
| SUB-TOTAL | | | | \$ 14,482.62 |
| 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).)

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)
Gifford for Iowa 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 |
|---------------------------------------|--|--|--------------------------------|-----------------|
| 5/24/02 | ID# CK# 1115 | KCCI TV 888 9th Street Des Moines, IA 50309 | Second Commercial Buy | \$1360.00 |
| 5/24/02 | ID# CK# 1116 | WHO TV 1801 Grand Ave. Des Moines, IA 50309 | Commercial Buy | 2110.00 |
| 5/24/02 | ID# CK# 1117 | U.S. Postal Service 1165 2nd Ave Des Moines, IA 50318 | Postage | 99.92 |
| 5/24/02 | ID# CK# 1118 | Mail Tech PO Box 7266 Des Moines, IA 50309 | Brochure Mailing | 280.37 |
| | ID# CK# | | | |
| SUB-TOTAL | | | | \$3850.29 |
| TOTAL (if last page of this schedule) | | | | \$18332.91 |

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 E (Rev. 06/97) | IN KIND CONTRIBUTIONS |
| <input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM | |

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

| 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 |
|---------------------------------------|--|---|-------------------------------------|-----------------------------|-----------------------------------|
| 5/23/02 | AFSCME PAC ID# 8019 1625 L St. NW Washington, DC 20036 | | Phone Bank | \$ 3000.00 | |
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| SUB-TOTAL | | | | \$ 3000.00 | |
| TOTAL (if last page of this schedule) | | | | \$ 3000.00 | |

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