

DISCLOSURE SUMMARY PAGE

JUN 3 2002

pm 5-30

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1229
Indexed	e
Audited	
Computer	

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

WICKLER FOR STATE HOUSE

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 State of Candidates

Thomas Angelwan

(563) 386-2672

5/30/02

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 5/28/02 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.)

\$ 5,564.11

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)

1,140.00

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.....\$

6,704.11

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)

27.72

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)

\$ 6,476.39

UNPAID BILLS (From Schedule D - Attach Schedule D) \$

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

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)

\$

353.33

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)

WIA KILLER FOR STATE HOUSE

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#	AL TANIK 24124 80TH AVE WALCOTT, IA 52773		\$ 50.00	
	ID# CK#	MARY WILLIAMS 2928 MIDDLE ROAD DAV IA 52803		25.00	
	ID# CK#	JIM LYKAM 2904 W 35TH ST DAV IA 52804		20.00	
	ID# CK#	KATHERINE FITZSIMMONS 3510 ROCKLEIGH HAN RD DAV IA 52802		50.00	
	ID# CK#	DON WELZENBACH 830 MISSISSIPPI DAV IA 52803		25.00	
	ID# CK#	LYNNE CHAMBERLIN 709 GRAND DAV IA 52803		50.00	
	ID# CK#	P.J. SLOBOTAN 623 W 6TH DAV IA 52803		25.00	
	ID# CK#	GRANT W CURTIS 6508 JEBENS DAV IA 52804		50.00	
	ID# CK#	SUE PANTERSON 2718 COLLIER DAV IA 52803		50.00	
	ID# CK#	ELDA EWOLDT 613 N 6TH S ELDRIDGE, IA 52748		20.00	
SUB-TOTAL				\$365.00	
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)
WINNIEKER FOR STATE HOUSE

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#	RETA VARGAS 2724. LE CLAREE DAV IA 52503		\$ 20.00	
	ID# CK#	TOM WOLFE 1905 EMERALD DR DAV IA 52504		25.00	
	ID# CK#	LOUISE WAEBSTER 2127 MARQUETTE DAV IA 52504		10.00	
	ID# CK#	TOM ENGELMANN 4552 MAIN DAV IA 52504		50.00	
	ID# 1229 CK# 1194	IBEW LOCAL 1362 PAC 370 BLAIRS FERRY RD NE CEDAR RAPIDS, IA 52402		100.00	
	ID# 6139 CK# 2099	LOCAL 310 UNITED STEEL WORKERS (COPE) 125 NW BROADWAY DES MOINES, IA 50313		200.00	
	ID# 8262 CK# 1777	ITOWWORKERS LOCAL 111 PAC 8000 29TH ST W ROCK ISLAND, IL 61201		250.00	
	ID# CK#	WALT + PATRICIA BARHAMAN		30.00	
	ID# CK#	UNIDENTIFIED, UNIDENTIFIED MISCELLANEOUS CASH		90.00	
	ID# CK#				
SUB-TOTAL				\$775.00	
TOTAL (if last page of this schedule)				\$1,140.00	

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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 PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE 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)

WINDLETT FOR STATE HOUSE

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
<i>4/23/02</i>	ID# CK# <i>1160</i>	<i>ETEE CURTIS 6508 JEBENS PAU IA 52804</i>	<i>FOOD FOR FUNDRAISER</i>	\$ <i>27.72</i>
	ID# CK#			

SUB-TOTAL \$ *27.72*

TOTAL (if last page of this schedule) \$ *27.72*

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).)

THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY

COMMITTEE NAME (Must be same as on Statement of Organization)
WINCKLER FOR STATE HOUSE

SCHEDULE H (Rev. 02/96)	CAMPAIGN PROPERTY
ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.	
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY

PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY **

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
<i>11/24/00</i>	<i>Fax Machine</i>	<i>504.71</i>	<i>353.33</i>

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 353.33

** PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ _____ TOTALS \$ _____ \$ _____

* If estimated, show est. beside figure.

(Attach Additional Schedules if Needed)