

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>740</u>
Indexed	<u>3W</u>
Audited	_____
Computer	_____

COMMITTEE NAME (Must be same as on Statement of Organization)
People for Hauser #1740

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

Paula M Hauser
 SIGNATURE OF TREASURER (or person filing this report)

(712) 486-2597
 TELEPHONE

Jan. 11, 2003
 DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

JAN 14 2003
 local mail

I AM FILING A January 19, 2003 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.)	\$	<u>3,729.00</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A)	\$	<u>2,210.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>\$ 5,939.00</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B)	\$	<u>2,773.33</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>3,165.67</u>
<hr/>		
UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>1,913.44</u>
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>0</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
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. 02/96)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

People For Hauser #740

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
Oct 17, 2002	ID# 6058 CK# 2121	Iowa Chiropractic Society 1605 N. Ankeny Blvd. Suite 100 Ankeny, Ia 50021-4159	None	\$ 250.00
Oct 26, 2002	ID# 6008 CK# 2012	Ass. Builders Contractors of Ia 475 Alices Road. Suite A Waukee, Iowa 50263-9637	None	50.00
Oct. 26, 2002	ID# 6118 CK# 1888	Ia. Optometric Association 1454 30th Street Suite 204 West Des Moines, Ia. 50266	None	250.00
Oct 26, 2002	ID# 6058 CK# 2224	Ia. Chiropractic Society PAC 1605 North Ankeny Blvd. Suite 100 Ankeny, Ia 50021-4154	None	150.00
Oct 30, 2002	ID# 6488 CK# 1130	Iowa Providers P.A.C. 7025 Hickman Road Suites URBANDALE, Ia 50322	None	\$ 1,000
Oct 31, 2002	ID# 6107 CK# 3298	West IPAC 225 High Street, 959 Des Moines Iowa, 50309	None	\$ 500.00
Dec 18, 2002	ID# CK# 4369	C. Clint Hoos Family Trust Box 324 Treyport, Iowa 51575	None	\$ 10.00
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL

\$ 2210.00

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

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)
People for Houser

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
10/16/2002	ID# CK# 953	Senate Majority Fund of Tom Cope 4824 Grand Ave. #103 Des Moines, Iowa 50312	Contribution	\$2,500.00
11/01/2002	ID# CK# 954	Gazette 1 P.O. Box 7 Neola, Iowa 51559-0007	Newspaper Subscription	20.00
11/06/2002	ID# CK# 955	Verizon Wireless Bellevue	Cell-Phone	13.44
11/09/2002	ID# CK# 956	American Express of Sen. N. Schmitt P.O. Box 290 Amanda Iowa 52203	Constituent work	\$ 115.00
11/27/2002	ID# CK# 957	U.S. Post Office Oakland, Iowa 51560	1 roll stamp and 1 mailing	\$ 37.68
11/30/2002	ID# CK# 958	Office Max #971 505 East 30th Ave. Council Bluffs Ia 51501	Office Supplies	\$ 50.87
12/17/2002	ID# CK# 959	Verizon Wireless, Bellevue P.O. Box 790422 St Louis, Missouri 63179-0422	Cell-Phone	12.01
01/01/03	ID# 10/01/02 CK# Treu 12/31/02	Trey nor State BK Box A Trey nor Iowa 51575-0009	Sales Tax and Service Charge	4.83
SUB-TOTAL				\$ 2,753.83
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

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

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
12/10/02	ID# Check / CK# Acc.	Treynor State Bank Box A Treynor Iowa 51575-0009	New Checks	\$ 19.50
	ID# CK#			

SUB-TOTAL \$ 19.50
TOTAL (if last page of this schedule) \$ 2,773.33

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 56.8(3)(i).)

