

**DISCLOSURE SUMMARY PAGE**

<b>FORM DR-2</b> (Rev. 01/98)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # <u>005</u>	
Indexed <u>SN</u>	<u>e</u>
Audited _____	
Computer _____	

*Mary*  
**COMMITTEE NAME** (Must be same as on Statement of Organization)  
KEAMER FOR STATE 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

*K. J. Keamer* 515 224-7613 JAN. 21, 2003  
**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 JAN. 21, 2003 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate one **FILED**

JAN 21 2003

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.)

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ..... \$ 27,121.56  
 Schedule F: Loans Received total (Attach Schedule F) ..... 2,125.00  
 Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... - 0 -

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

**SUB-TOTAL** ..... \$ 29,246.56

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ..... 2,523.41  
 Schedule F: Loan Repayments total (Attach Schedule F) ..... - 0 -

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... \$ 26,723.15

**UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ - 0 -

**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) ..... \$ 250.00

For Instructions, See Back of 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)  
*KRAMER FOR STATE 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
11/4/02	ID# 6107 CK# 3294	QUEST I PAC 925 High St. 959 D.M. 50309		\$1,000.00	
11/7/02	X ID# VSR CK# 1559	Monmouth Citizenship Fund 820 N. Lindbergh Blvd. St. Louis, MO 63167		500.00	
11/8/02	ID# CK# 2606	Robert L. Parks 1926 BerSalo Rd. WDM 50265		25.00	
11/8/02	ID# CK# 1778	Joseph T. Chame/Kra 109-5th Ct. WDM 50266		75.00	
11/25/02	ID# 9686 CK# 2090	United Brothers Schools PAC 603 E. 6th St D.M. 50309		50.00	
11/25/02	X ID# VSR CK# 4439	Citigroup Inc. PAC 901 15th St. N.W. St. 300 Washington, D.C. 2005		320.00	
12/4/02	X ID# VSR CK# 3228	3M PAC 3M Center St. Paul, MN 55144-1000		200.00	
12/16/02	ID# CK# 9014	Cameron Coopers 5720 Aspen Dr. WDM 50266		25.00	
	ID# CK#				
	ID# CK#				
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$2,125.00	

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 initial relationship, enter "not applicable" in the relationship column.

**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)  
*KRAMER FOR STATE 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
<i>12/4/02</i>	ID# CK# <i>1072</i>	<i>HY VEE FOOD STORE 1725 74th St. WDM 50266</i>	<i>6 Rolls of Stamps Sou Const. Thank you letters</i>	<i>\$ 222.00</i>
<i>12/5/02</i>	ID# CK# <i>1073</i>	<i>MARY KRAMER 13548 Village Ct. Clive 50325</i>	<i>Reimbursement on 2002 DMCMB dues</i>	<i>1,260.00</i>
<i>12/9/02</i>	ID# CK# <i>1074</i>	<i>MARY KRAMER 13548 Village Ct. Clive 50325</i>	<i>D.C. TRAVEL EXPENSES - White House Crossing, Home and Security + Medicines</i>	<i>853.40</i>
<i>12/15/02</i>	ID# CK# <i>1075</i>	<i>HY VEE FOOD STORE 1725 74th St. WDM 50325</i>	<i>Leadership Meeting Bev. + Food expenses (12/16/02)</i>	<i>76.18</i>
<i>12/17/02</i>	ID# CK# <i>1076</i>	<i>Palmer's Deli 50th at Westown Pkwy WDM 50266</i>	<i>Leadership Meeting Bev. + Food expenses (12/16/02)</i>	<i>111.83</i>
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 2,523.41</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).)

**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

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

*KRAMER FOR STATE SENATE*

SCHEDULE <b>H</b> (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>10/28/01</i>	<i>LASEL FAX+ SERVICE Cont. FAX-2800</i>	<i>399.41</i>	<i>125.00</i>
<i>11/01/01</i>	<i>Verizon Cell Phone</i>	<i>116.58</i>	<i>50.00</i>
<i>12/13/01</i>	<i>V-Tech. 2 Line Router Machine</i>	<i>173.81</i>	<i>75.00</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) \$ *250.00*

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

\* If estimated, show *est.* beside figure.

(Attach Additional Schedules if Needed)