

# DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. # <u>1862</u>	
Indexed <u>5U</u>	
Audited _____	
Computer _____	

COMMITTEE NAME (Must be same as on Statement of Organization) Myers for the House 862

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 Slate of Candidates

SIGNATURE OF TREASURER (or person filing this report) [Signature] TELEPHONE 319 351 7794

17 Jan 03

DATE SIGNED 17 Jan 03  
 DISCLOSED TO FILED  
 JAN 21 2003  
HD

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 19 Jan 03 REPORT FOR AN/A (1) ELECTION / (2) 2 (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 <b>MUST</b> 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>13,843.71</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) .....		<u>35,920.00</u>
Schedule F: Loans Received total (Attach Schedule F) .....		_____
Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....		_____
<u>(Schedule H applies to Candidates' Committees Only)</u>		
	SUB-TOTAL .....	\$ <u>49,763.71</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) .....		<u>46,700.00</u>
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) .....	\$	<u>3,063.71</u>
<hr/>		
UNPAID BILLS (From Schedule D - Attach Schedule D) .....	\$	_____
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....	\$	<u>943.12</u>
OUTSTANDING LOANS (From Schedule F - Attach Schedule F) .....	\$	<u>2,000.00</u>
<b>CANDIDATE COMMITTEES ONLY:</b>		
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>None</u>

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

*Members for the House 662*

**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
4 NOV 02	ID# 8377 CK# 1153	Aventis Pharmaceutical PAC 801 Pennsylvania Ave NW Ste 725 Washington DC 20004	None	\$ 200 <sup>00</sup>	
4 NOV 02	ID# 6118 CK# 1895	Iowa Optometric Assn. PAC 1454 30th St, Ste 204 West Des Moines, IA 50266	None	400 <sup>00</sup>	
13 NOV 02	ID# 6351 CK# 1110	Petroleum Marketers IA PAC 1303 50th West Des Moines, IA 50266	None	500 <sup>00</sup>	
	ID# CK#				

SUB-TOTAL

\$ 1100<sup>00</sup>

TOTAL (if last page of this schedule)

\$ 35,920

\* 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 <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)  
*Majors for the House 862*

**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
30 Oct 02	ID# 9856 CK# 1140	Effective Government Committee 607-14th St. N.W. Ste 800 Washington, D.C. 20005	None	\$ 10,000 <sup>00</sup>	
30 Oct 02	ID# 6046 CK# 3616	Justice for All PAC 218 6th Ave Ste 526 Des Moines, Iowa 50309	None	2,000 <sup>00</sup>	
30 Oct 02	ID# 8153 CK# 1396	21st Century Democrats 1311 L St. N.W. Ste 300 Washington, D.C. 20005	None	120 <sup>00</sup>	
30 Oct 02	ID# 6019 CK# 0553	CWA Local 7102 PAC 3612 SW 9th St. Des Moines, IA 50315	None	200 <sup>00</sup>	
4 Nov 02	ID# 9655 CK# 1005	ILTA PAC P.O. Box 206 Eldora Iowa 50627	None	150 <sup>00</sup>	
4 Nov 02	ID# CK# 9840	Susan Cameron 2202 NW 140th St. Clive Iowa 50325	None	200 <sup>00</sup>	
4 Nov 02	ID# CK# 10307	Thomas R Scott 419 E Fairchild Iowa City, Iowa 52245	None	250 <sup>00</sup>	
4 Nov 02	ID# 6291 CK# 2171	I H A PAC 100 E Grand Ste 100 Des Moines, IA 50309	None	1500 <sup>00</sup>	
4 Nov 02	ID# 6113 CK# 2798	AF6CME Co. 61 PAC 4320 NW 2nd Ave Des Moines, Iowa 50313	None	20,000 <sup>00</sup>	
4 Nov 02	ID# 8028 CK# 1569	Monsanto Citizenship Fund 800 N. Lindbergh Blvd. St. Louis, mo 63167	None	400 <sup>00</sup>	
SUB-TOTAL				34,820	
TOTAL (if last page of this schedule)				\$	

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FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE <b>B</b> (Rev. 09/97)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING 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.

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Myers for the House 862*

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
30 Oct 02	ID# CK# 1193	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321	contribution	\$ 25,000. <sup>00</sup>
4 Nov 02	ID# CK# 1194	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321	contribution	21,000. <sup>00</sup>
4 Dec 02	ID# CK# 1196	Iowa Democratic Party 5661 Fleur Drive Des Moines, IA 50321	contribution	700. <sup>00</sup>
	ID# CK#			
SUB-TOTAL				\$ 46,700
TOTAL (if last page of this schedule)				\$ 46,700

**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 <b>F</b> (Rev. 08/96)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Myers for the House 862*

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 2000<sup>00</sup>

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**  
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
15 May 00	Richard E Myers 9 Woodland Hts. Iowa City Iowa	candidate	\$ 2000 <sup>00</sup>

TOTAL (PART I) \$ 2000<sup>00</sup>

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
 (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
			\$

TOTAL CASH REPAYMENTS (PART II) \$ \_\_\_\_\_  
 From Schedule E -- TOTAL LOANS FORGIVEN \$ \_\_\_\_\_  
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 2000<sup>00</sup>

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