

**FORM DR-2: Disclosure Summary Page**Status: **Amended**ID #: **1400**Committee: **Upmeyer for House**Comm Type: **State House**Date Due: **01/19/2003**Report Year: **2002**Treasurer: **Dorothy DeVary**

Primary Ph. (641)923-2070 Secondary Ph. (-)

Chair: **Linda L Upmeyer**

Primary Ph. (641)923-3398 Secondary Ph. (-)

County: **NA**Amended: **6/5/03**

Statutory Due Date	01/19/2003
Adjusted Due Date	01/21/2003
Received Date	01/21/2003
Postmark Date	/ /
Amended	06/05/2003

**Statement of Cash on Hand**

Cash on Hand at Start of Period	\$6,295.51
Schedule A: Cash contributions Total	\$2,075.00
Schedule F: Loans Received Total	\$0.00
Schedule H: Campaign Property Sales	\$0.00
<b>SUB-TOTAL</b>	<b>\$8,370.51</b>
Schedule B: Expenditure Total	\$6,453.09
Schedule F: Cash Loan Repayments	\$600.00
Cash on Hand At End of Period	1,317.42

**Additional Assets and Liabilities**

Loans in Place at Start of Period	\$600.00
Schedule D: UnPaid Bills	\$3,006.26
Schedule E: In-Kind Contributions	\$2,137.52
Schedule F: Forgiven Loans	\$0.00
Schedule F: Outstanding Loans	\$0.00
Schedule G: Consultant Breakdown?	No
Schedule H: Campaign Property Value	\$0.00

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 05/2002)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	1400
Indexed	SW
Audited	4-11-03
Computer	WRS

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Upmeyer for House

**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 State of Candidates

**CANDIDATE COMMITTEES ONLY:**

Candidate Name Linda Upmeyer Political Party Republican  
 Office Sought House of Representatives District (if Senate or House) 12

JAN 21 2003  
 FILED hd

Linda Upmeyer 641-923-3398 1/18/03  
 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. 19, 2003 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate one  1

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.) 518,681.30 \$ 5819.33

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 2075.00

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.....** \$ 7894.33

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD** 518,645.09

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) ... 7055.08

Schedule F: Loan Repayments total (Attach Schedule F) ..... 600.00

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... 518,183.21 \$ 1268.42

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)..... \$ 3006.26

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 2137.52

**\*\*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.

Repeal From

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)  
*Ameyer for 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
10/30/02	ID# CK#	Marcy Kaehn 6612 1/2 Ave NE Jowa City, IA 52240		\$ 25.00	<input type="checkbox"/>
11/2/02	ID# 6234 CK# 003858	IEBF - PAC 5400 University Ave. WDM, IA 50266-5997		1000.00	<input type="checkbox"/>
11/2/02	ID# CK#	Nelson Crabb 108-33rd St. W, Clear Lake, IA 50428		100.00	<input type="checkbox"/>
11/4/02	ID# 6477 CK# 1020	RDH - PAC Sue Ollman, chair 15 Charlestown Square Mason City, IA 50401		100.00	<input type="checkbox"/>
11/6/02	ID# 6264 CK# 1085	Iowa Auto Recyclers PAC (Robt. Miller) PO Box 628 Oskaloosa, IA 52577		100.00	<input type="checkbox"/>
12/4/02	ID# 6070 CK# 2888	Iowa Law PAC 521 East Locust St, 7L3rd Des Moines, IA 50309-1939		100.00	<input checked="" type="checkbox"/>
12/4/02	ID# 6101 CK# 2303	Motor Carriers PAC Scott PO Box 6121, East Dm St, W Des Moines, IA 50309		250.00	<input checked="" type="checkbox"/>
12/4/02	ID# CK# 1432	Stephen Roberts 666 Walnut St, Suite 2500 Des Moines, IA 50309		50.00	<input checked="" type="checkbox"/>
12/4/02	ID# 6096 CK# 1666	Manufactured Housing PAC 1400 Dean Ave. Des Moines, IA 50316 (Bob Kelley)		100.00	<input checked="" type="checkbox"/>
12/4/02	ID# 6116 CK# 1167	Iowa Dealers PAC PO Box 65240 WDM, IA 50265		100.00	<input checked="" type="checkbox"/>
(Governor Schroeder) SUB-TOTAL				1925.00	<input checked="" type="checkbox"/>
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

Reset 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)  
*Harney for 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
10/30/02	ID# CK# 1107	HIMT 112 N. Penn Ave Mason City, IA 50401	TV ads	2687.25
10/31/02	ID# CK# 1108	Ce Lobe Gazette 300 N. Penn Ave Mason City, IA 50401	Newspaper Ads	682.77
10/31/02	ID# CK# 1109	HIMT 112 N. Penn Ave Mason City, IA 50401	TV ads	1323.25
11/4/02	ID# CK# 1110	Bell's Fam. Foods 255 Sway 1800 Garner, Ia 50438	post - election volunteer event	89.53
11/5/02	ID# CK# 1111	Walmart Mason City, Ia 50401	food, buns, pop, paper products, Chips - election event	139.00
11/5/02	ID# CK# 1112	Super Warehouse Mason City, Ia 50401	decorations & plastic glasses	20.07
11/9/02	ID# CK# 1113	Staples 3450 4th St. SW Mason City, Ia 50401	file boxes & changing files	37.04
11/10/02	ID# CK# 1114	AGP 390 E. 5th St. Garner, Ia 50438	wooden stakes for yard signs	49.61
SUB-TOTAL				\$ 4999.52
TOTAL (if last page of this schedule)				\$ 4999.52

**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

Reset 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)  
*Loomeyer For 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
11/16/02	ID# CK# 1115	Doug Loomeyer 2175 Pine Ave Garner, Ia 50438	mileage & expenses for all parades	\$ 320.76
11/16/02	ID# CK# 1116	Jinda Loomeyer 2175 Pine Ave Garner, Ia 50438	re-pay loan	600.00
11/18/02	ID# CK# 1117	Hanauha Reporter Hanauha, Ia	thank-you ad	25.00
11/18/02	ID# CK# 1118	Liz Waddingham W. 12th St. Garner, Ia 50438	food for election party	20.00
11/18/02	ID# CK# 1119	Chad Loomeyer Clear Lake, Ia 50428	Web site fee - tip.	122.40
11/18/02	ID# CK# 1120	Clear Lake EDC Clear Lake, Ia 50428	economic roundtable mtg. lunch	7.50
12/1/02	ID# CK# 1121	Garner Reader 36 S State St. Garner, Ia 50438	thank-you ad	27.93
12/1/02	ID# CK# 1122	Damptson Publishing 9-2nd St NW Box 29 Damptson, Ia 50441	thank-you ad	24.30
			518 547.89 SUB-TOTAL	\$ 1147.49
			TOTAL (if last page of this schedule)	\$ 676.11

See Sch F

**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>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)  
*Upmeyer for 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
12/11/02	ID# CK# 1123	Designer Checks PO Box 9200 Anniston, AL 36202-9200	Checks	\$ 14.70
12/30/02	ID# CK# 1124	Southern Co. News PO Box 96 300 Main Thornton, IA 50479	ad - thank you	17.29
12/28/02	ID# CK# 1125	Victory Enterprises 5200 SW 30th St Davenport, IA 52802	Radio Ads	202.93
12/28/02	ID# CK# 1126	Sheffield Press 305 Gillman St. Sheffield IA 50475	thank - you ad	16.50
12/28/02	ID# CK# 1127	Postmaster 190 E. 3rd Garner, IA 50438	Stamps	37.08
12/30/02	ID# CK# 1128	RPI 621 E. 9th St. Des Moines, IA 50329	partial pmt. Contribution	250.00
12/30/02	ID# CK# 1129	Clear Lake Mirror Clear Lake, IA	Thank you ad	53.64
12/30/02	ID# CK# 1130	Clear Lake Chamber Clear Lake, IA	Bal. of Membership	11.00
SUB-TOTAL				\$ 603.06
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

Reset Form

**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)

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
12/31/02	ID# CK# 1131	Linda Wmeyer 2175 Pine Ave. Carnar, Ia 50438	Re-pay for: Room for post-election campaign parade candy overnight mail volunteer food for May	\$313.62
	ID# CK#		mailing Newspaper subscrip to So. Co. News	
	ID# CK#			

SUB-TOTAL \$ 313.62  
 TOTAL (if last page of this schedule) \$ 7058.00  
 318 6453.09

**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

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

Reset Form

CHECK THIS BOX IF AMENDING FORM

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
✓ 10/4/02	LMF/RPI 621 E 9th St. Des Moines, IA 50309		Printing Anderson Bros	\$ 405.78	<input type="checkbox"/>
✓ 11/2/02	LMF/RPI 621 E 9th St. Des Moines, IA 50309	Victory Enterprises	Radio Buy	300.00	<input type="checkbox"/>
✓ 11/1/02	LMF/RPI 621 E 9th St. Des Moines, IA 50309	Mail House	Postage/ Processing	431.74	<input type="checkbox"/>
✓ 12/9/02	IFBF-PAC 5400 University W.D.M., IA 50266		polling expense	1000.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

3/13  
10-31  
5/13  
10-30  
5/13  
10-29

SUB-TOTAL \$ 2137.52  
TOTAL (if last page of this schedule) \$ 2137.52

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.

Reset Form

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)  
Upmeyer For House

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 600.00

**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.)

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

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

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
11/16/02	Linda Upmeyer 2175 Pine Ave. Garner, Va 50438	Self	\$ 600.00

TOTAL (PART I) \$ \_\_\_\_\_

TOTAL CASH REPAYMENTS (PART II) \$ 600.00

From Schedule E -- TOTAL LOANS FORGIVEN \$ \_\_\_\_\_

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ - 0 -

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