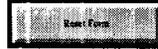


C 1000 1670 0002 9580 6379

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE



FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	6097
Logged In	SW
Scanned	
Computer	
Audited	

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

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

CANDIDATE COMMITTEES ONLY:

Candidate Name _____ Political Party _____
Office Sought _____ District (if Senate or House) _____

JUL 21 2003
7/18/03
DATE SIGNED

Donald P. Sesterhenn
SIGNATURE OF TREASURER (or person filing this report)

644-1787-8943
TELEPHONE

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A July 14, 2003 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.

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.)	\$ 3,837.64
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	3,314.22
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	\$ 7,151.86
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	2,000.00
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)	\$ 5,151.86

**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) \$ _____

For Instructions, See Back of Form



SCHEDULE	
A	MONETARY RECEIPTS
(Rev. 07/03)	
<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)

MAYTAG DEPENDABILITY FUND

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.

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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
05/30/03 06/30/03	ID# CK#	R. L. ABERCROMBIE 128 NORTHMAN DRIVE COLUMBIA, SC 29210	@8.34	\$ 16.68	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	F.S. ALLEN 1100 WOODLAND DR NEWTON, IA 50208	@17.33	34.66	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	P. R. ALLEN 209 ROBIN COVE DR NW CLEVELAND, TN 37312	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	T. S. ANDERSON 1213 S 15th AVE W NEWTON, IA 50208	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. ARNOLD 624 CHEYENNE CIRCLE LOUISVILLE, OH 44641	@5.00	10.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. M. BAKER 320 MARION AVE S LOUISVILLE, OH 44641	@30.00	60.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	M. E. BALES 1685 FLAGSTONE PL NW CLEVELAND, TN 37312	@5.00	10.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	W. L. BEER 1203 S 12th AVE W NEWTON, IA 50208	@50.00	100.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. M. BLOOMQUIST 1218 SOUTH 6th AVE E NEWTON, IA 50208	@4.00	8.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	V. A. BORING 406 NE 28th ST ANKENY, IA 50021	@35.00	70.00	<input type="checkbox"/>
SUB-TOTAL				\$ 349.34	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)	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)

MAYTAG DEPENDABILITY FUND

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.

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05/30/03 06/30/03	ID# CK#	H. E. BOWEN 728 SPRINGFIRE EL PASO, TX 79912	@35.00	\$ 70.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. C. BREESE 8646 PEARSON DRIVE DARIEN, IL 60561	@40.00	80.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	T. A. BRIATICO 217 SWEET GUM CT AIKEN, SC 29803	@40.00	80.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	M. R. CAMPBELL 4571 DEERWOOD CIRCLE JOHNSTON, IA 50131	@35.00	70.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. E. CARR P O BOX 707 VALLEY VIEW, TX 76272	@8.34	16.68	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	S. L. CLAUDE 8700 W BRYN MAR CHICAGO, IL 60631	@40.00	80.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. E. CLAY 459 YATES GALESBURG, IL 61401	@3.85	7.70	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. K. COOK 3202 N E BRIARWOOD DR ANKENY, IA 50021	@16.67	33.34	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	W. H. CRIPPS 12806 CARISSA COURT RANCH CUCAMONGA, CA 91739	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	S. D. DODGE 35 LAKEVIEW DR BARRINGTON, IL 60010	@40.00	80.00	<input type="checkbox"/>
SUB-TOTAL				\$ 537.72	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)	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)

MAYTAG DEPENDABILITY FUND

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05/30/03 06/30/03	ID# CK#	L. S. DRAGOMIER 9370 GANS AVE NE NORTH CANTON, OH 44721	@25.00	\$ 50.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	C. J. DURHAM 1010 GOLF COURSE DRIVE SEARCY, AR 72143	@35.00	70.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	L. W. EHLER 109 OAKVIEW KNOXVILLE, IL 61448	@2.00	4.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. E. FARLAND 1301 RIDGEWAY DR NEWTON, IA 50208	@5.00	10.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. R. FERRIS 221 HIDDEN FORREST DR NE CLEVELAND, TN 37323	@8.33	16.66	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. L. FISHER 601 E NEWMAN KNOXVILLE, IL 61448	@1.00	2.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	E. L. FREEMAN, JR. 3865 CHATATA VALLEY CHARLESTON, TN 37310	@5.00	10.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. C. FULLER, JR 1004 IVEY LANE CARTERVILLE, IL 62918	@8.34	16.68	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. A. GAULT 710 MAGNOLIA CR SE NORTH CANTON, OH 44709	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	P. R. GRAY 1120 JEFFERSON ST JOHNSTON CITY, IL 62951	@8.34	16.68	<input type="checkbox"/>
SUB-TOTAL				\$ 216.02	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)	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)
MAYTAG DEPENDABILITY FUND

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05/30/03 06/30/03	ID# CK#	R. F. HAKER 315 W 11TH ST S NEWTON, IA 50208	@100.00	\$200.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	G. J. HAWORTH 1061 WOODBINE CIRCLE GALESBURG, IL 61401	@4.62	9.24	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	T. E. HOLLANDER 1010 W 18 ST S NEWTON, IA 50208	@5.00	10.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. C. HORSTMAN 10092 MCCARTY CREST COURT FAIRFAX STATION, VA 22030	@50.00	100.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. C. HUFFER 264 WILLOW LAKE DR AIKEN, SC 29801	@20.00	40.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. G. HUMMEL 6875 HARBOR DR NW CANTON, OH 44718	@20.00	40.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	G. P. IRWIN 511 GOODSILL DR E GALESBURG, IL 61430	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	W. E. JAY 3901 HOLLY HILL DR CLEVELAND, TN 37312	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. C. JENKINS 1223 FRANKLIN DR CHATTANOOGA, TN 37421	@8.33	16.66	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. F. JOHNSON 12033 OLD STONE DR INDIANAPOLIS, IN 46236	@10.00	20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 475.90	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)	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)
MAYTAG DEPENDABILITY FUND

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05/30/03 06/30/03	ID# CK#	T. M. JOHNSON 1700 N PRAIRIE ST GALESBRUG, IL 61401	@4.62	\$ 9.24	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. W. JOHNSTON 401 VINE AVE NE MITCHELLVILLE, IA 50169	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	P. A. KLAPP 4286 SAGEWOOD COURT GALESBURG, IL 61401	@1.00	2.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	W. E. KLAPP 4286 SAGEWOOD CT GALESBURG, IL 61401	@1.00	2.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	S. J. KLYN 4410 HIGHWAY 146 GRINNELL, IA 50112	@35.00	70.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. E. KRAJNOVICH 2386 W 15th ST S NEWTON, IA 50208	@2.50	5.00	<input type="checkbox"/>
05/30/03	ID# CK#	D. C. KRETZ 3803 CEDAR GROVE CT NE CEDAR RAPIDS, IA 52411	@35.00	35.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. KUEBLER 7728 BEBE BRANCH LANE OOLTEWAH, TN 37363	@7.50	15.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	L. L. LAMB 252 KNOX RD 2350N RIO, IL 61472	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	A. B. LEARMOUTH 1017 S FIFTH AVE. W NEWTON, IA 50208	@20.00	40.00	<input type="checkbox"/>
SUB-TOTAL				\$ 218.24	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)	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)

MAYTAG DEPENDABILITY FUND

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.

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05/30/03 06/30/03	ID# CK#	D. E. LEVI 774 WARE ROAD RINGGOLD, GA 30736	@8.33	\$ 16.66	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. R. LITTLE 2900 SAN EFRAIN MISSION, TX 78572	@40.00	80.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	P. A. LOCH 1705 MANSION RIDGE ROAD ANNAPOLIS, MD 21401	@40.00	80.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	G. W. MARTIN 1100 ROBIN HOOD DR NW CLEVELAND, TN 37311	@8.33	16.66	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	P. J. MARTIN 6980 N W BEAVER DR JOHNSTON, IA 50131	@25.00	50.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	T. L. MAYHUGH 3402 SUSEX COURT FLORENCE, SC 29501	@35.00	70.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. R. MAYNE 4209 SUMMIT WAY MARIETTA, GA 30066	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. L. MCCARVILLE 1105 S 5TH AVE W NEWTON, IA 50208	@5.00	10.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	L. MCDARIS 453 CENTENARY AVE CLEVELAND, TN 37311	@6.25	12.50	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. W. MCMILLAN 1315 W 8TH ST S NEWTON, IA 50208	@20.00	40.00	<input type="checkbox"/>
SUB-TOTAL				\$ 395.82	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)	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)

MAYTAG DEPENDABILITY FUND

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05/30/03 06/30/03	ID# CK#	J. C. MILLET 829 E 17th ST N NEWTON, IA 50208	@4.00	\$ 8.00	<input type="checkbox"/>
05/30/03	ID# CK#	K. G. MINTON 6332 LANGLEY NW CANTON, OH 44718	1@50.00	50.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. J. MORANIEC 825 S E MICHAEL DR ANKENY, IA 50021	@2.00	4.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	M. G. NASS 2161 NW 139th ST CLIVE, IA 50325	@8.34	16.68	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	L. A. NEPPLE 2805 NE TRILEIN DR ANKENY, IA 50021	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	A. P. ORSUND 1118 WOODLAND DR NEWTON, IA 50208	@2.00	4.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. L. PAGE 8 JACOBS LANE KILLINGWORTH, CT 06419	@1.00	2.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	T. L. PATTON 7 TOLLAND CIRCLE SIMSBURY, CT)6070	@4.17	8.34	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	E. T. PAULICH 518 SOUTH MARKET MARION, IL 62959	@8.34	16.68	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. F. PENNY 2025 W 15th ST S NEWTON, IA 50208	@8.34	16.68	<input type="checkbox"/>

SUB-TOTAL

\$ 146.38

TOTAL (if last page of this schedule)

\$

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Page 7 of 11
(for Schedule A)

For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)	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)
MAYTAG DEPENDABILITY FUND

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05/30/03 06/30/03	ID# CK#	L. G. PETERSON 180 W FREMONT ST GALESBURG, IL 61401	@2.00	\$ 4.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. E. PIERCE 1785 ANDREWS PLEASANT HILL, IA 50237	@35.00	70.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. A. RAMAGE 453 KINGS CANYON GALESBURG, IL 61401	@12.00	24.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	M. A. REUSSWIG 598 KYLE LANE NW CLEVELAND, TN 37312	@15.00	30.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	C. G. RICHARDSON 1919 SOUTH 27th ST HERRIN, IL 62948	@2.17	4.34	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	C. J. RIEGEL 1003 E 17th ST S NEWTON, IA 50208	@2.50	5.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. M. RINGGER 3644 HARBOR AVE NEWTON, IA 50208	@3.00	6.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. L. RITZHAUPT 1610 ROCKLAND CT CLEVELAND, TN 37311	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. J. ROBINSON 963 E LOSEY ST GALESBURG, IL 61401	@8.00	16.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	E. S. ROTH 620 E 17th ST N NEWTON, IA 50208	@4.00	8.00	<input type="checkbox"/>
SUB-TOTAL				\$ 187.34	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

MAYTAG DEPENDABILITY FUND

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
05/30/03 06/30/03	ID# CK#	A. V. RUSSELL 113 GATEWOOD DRIVE AIKEN, SC 29801	3 @10.00	\$ 30.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	I. P. SARGUNAM 155 COUNTRY PL DR NW CLEVELAND, TN 37312	@1.67	3.34	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	T. D. SCHILTZ 194 RANDAL CIR NE NO CANTON, OH 44720	@35.00	70.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. SCHOLTEN 4106 JOHN LYNDE ROAD DES MOINES, IA 50312	@50.00	100.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. T. SELIGA 623 E 18th ST N NEWTON, IA 50208	@3.85	7.70	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. C. SHEARS 1119 HUNTING DRIVE PALATINE, IL 60067	@50.00	100.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. K. STARKWEATHER 41 BLUE GRASS COVE JACKSON, TN 38305	@35.00	70.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. P. STEINER 7005 DEVEREUX CIRCLE DR ALEXANDRIA, VA 22315	@37.50	75.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	C.H. STINCHFIELD JR 3640 SOURWOOD TRAIL NW CLEVELAND, TN 37312	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	V. A. STUKAS 14096 SOUTH SHORE DRIVE CLIVE, IA 50325	@40.00	80.00	<input type="checkbox"/>
SUB-TOTAL				\$ 556.04	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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
05/30/03 06/30/03	ID# CK#	L. W. TIMM 2109 LERIN LANE MARION, IL 62959	@4.17	\$ 8.34	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. S. TURNER, JR P O BOX 913 BARNWELL, SC 29812	3 @10.00	30.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	J. UNDERWOOD P O BOX 3754 CLEVELAND, TN 37311	@.90	1.80	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. P. VAN HOOK, JR 414 S W 13th ST ALTOONA, IA 50009	@4.62	9.24	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	S. F. WEGNER 1512 W 14th ST S NEWTON, IA 50208	@1.00	2.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. WHITE 8460 KEYSTONE CIRCLE CHATTANOOGA, TN 37421	@10.00	20.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	D. F. WILSON III 29 COVE COURT NAPA, CA 94559	@8.34	16.68	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	R. F. WILSON 207 LYNNE CARTERVILLE, IL 62918	@8.34	16.68	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	F. E. WITTMAN 5532 SEVERN CR NW CANTON, OH 44708	@20.00	40.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#	L. E. YOKIEL 1013 S 13th AVE W NEWTON, IA 50208	@8.34	16.68	<input type="checkbox"/>
SUB-TOTAL				\$ 161.42	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)	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)*
MAYTAG DEPENDABILITY FUND

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
05/30/03 06/30/03	ID# CK#	T.H. YU @35.00 432 LOWELL DR HIGHLAND HTS, OH 44143		\$ 70.00	<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#				<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#				<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#				<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#				<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#				<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#				<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#				<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#				<input type="checkbox"/>
05/30/03 06/30/03	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 70.00	
TOTAL (if last page of this schedule)				\$3,314.22	

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	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)
MAYTAG DEPENDABILITY FUND

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
06/13/03	ID# CK# 1580	FRIENDS OF BLANCHE LINCOLN 122 MARYLAND AVE NE, 3D WASHINGTON, DC 20002	CONTRIBUTION	\$ 1,000.00
06/20/03	ID# CK# 1581	KING FOR CONGRESS 3000 K ST, NW, SUITE 125 WASHINGTON, DC 20007	CONTRIBUTION	1,000.00
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 2,000.00

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 68A.6(3)(i).)