



**DISCLOSURE SUMMARY PAGE**

<b>FORM DR-2</b> (Rev. 01/98)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	4038
Indexed	SW
Audited	
Computer	

**COMMITTEE NAME** (Must be same as on Statement of Organization) pm 10-16  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**IMPORTANT:** Indicate type of committee you are reporting for:  2

(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

Lathy D. Stamer 641-269-6560 10-16-03  
**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 OCT 19, 2003 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate one  2

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 the first report filed.) ..... \$ 4,752.63

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ..... 1,199.06

Schedule F: Loans Received total (Attach Schedule F) ..... 0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... 0.00

(Schedule H applies to Candidates' Committees only) **SUB-TOTAL** ..... \$ 1,199.06

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ..... 600.00

Schedule F: Loan Repayments total (Attach Schedule F) ..... 0.00

**CASH ON HAND** at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... \$ 5,351.69

**UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ 0.00

**IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 0.00

**OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ 0.00

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?) \_\_\_\_\_ YES \_\_\_\_\_ NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) ..... \$ 0.00

**For Instructions, See Back of Form**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Rodney D Anderson 1654 Fisher Ave New Sharon, Ia 50207		2.00	
08/08/03	ID# CK#	Rodney D Anderson 1654 Fisher Ave New Sharon, Ia 50207		2.00	
08/22/03	ID# CK#	Rodney D Anderson 1654 Fisher Ave New Sharon, Ia 50207		2.00	
09/05/03	ID# CK#	Rodney D Anderson 1654 Fisher Ave New Sharon, Ia 50207		2.00	
09/19/03	ID# CK#	Rodney D Anderson 1654 Fisher Ave New Sharon, Ia 50207		2.00	
10/03/03	ID# CK#	Rodney D Anderson 1654 Fisher Ave New Sharon, Ia 50207		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
<b>SUB-TOTAL</b>				<b>\$ 16.00</b>	
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 10.00

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Marguerite L Beeler 732 Pearl St Grinnell, Ia 50112-1929		2.00	
SUB-TOTAL				\$ 11.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/08/03	ID# CK#	Marguerite L Beeler 732 Pearl St Grinnell, Ia 50112-1929		2.00	
08/22/03	ID# CK#	Marguerite L Beeler 732 Pearl St Grinnell, Ia 50112-1929		2.00	
09/05/03	ID# CK#	Marguerite L Beeler 732 Pearl St Grinnell, Ia 50112-1929		2.00	
09/19/03	ID# CK#	Marguerite L Beeler 732 Pearl St Grinnell, Ia 50112-1929		2.00	
10/03/03	ID# CK#	Marguerite L Beeler 732 Pearl St Grinnell, Ia 50112-1929		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
<b>SUB-TOTAL</b>				<b>\$ 15.00</b>	
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Patricia A Bell 508 West St Grinnell, Ia 50112-2362		2.00	
08/08/03	ID# CK#	Patricia A Bell 508 West St Grinnell, Ia 50112-2362		2.00	
08/22/03	ID# CK#	Patricia A Bell 508 West St Grinnell, Ia 50112-2362		2.00	
09/05/03	ID# CK#	Patricia A Bell 508 West St Grinnell, Ia 50112-2362		2.00	
09/19/03	ID# CK#	Patricia A Bell 508 West St Grinnell, Ia 50112-2362		2.00	
10/03/03	ID# CK#	Patricia A Bell 508 West St Grinnell, Ia 50112-2362		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 16.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Virginia L Billman 4131 70th St Grinnell, Ia 50112		2.00	
08/08/03	ID# CK#	Virginia L Billman 4131 70th St Grinnell, Ia 50112		2.00	
08/22/03	ID# CK#	Virginia L Billman 4131 70th St Grinnell, Ia 50112		2.00	
09/05/03	ID# CK#	Virginia L Billman 4131 70th St Grinnell, Ia 50112		2.00	
09/19/03	ID# CK#	Virginia L Billman 4131 70th St Grinnell, Ia 50112		2.00	
10/03/03	ID# CK#	Virginia L Billman 4131 70th St Grinnell, Ia 50112		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL	\$ 16.00
<b>TOTAL (if last page of this schedule)</b>	\$

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 10.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 10.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Cynthia S Cloyed 1221 Prince Street Grinnell, Ia 50112		2.91	

SUB-TOTAL \$ 11.91

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/08/03	ID# CK#	Cynthia S Cloyed 1221 Prince Street Grinnell, Ia 50112		2.91	
08/22/03	ID# CK#	Cynthia S Cloyed 1221 Prince Street Grinnell, Ia 50112		2.91	
09/05/03	ID# CK#	Cynthia S Cloyed 1221 Prince Street Grinnell, Ia 50112		2.91	
09/19/03	ID# CK#	Cynthia S Cloyed 1221 Prince Street Grinnell, Ia 50112		2.91	
10/03/03	ID# CK#	Cynthia S Cloyed 1221 Prince Street Grinnell, Ia 50112		2.91	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 19.55

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Marjean Crandall 230 Rock Creek West St Kellogg, Ia 50135-9602		2.00	
08/08/03	ID# CK#	Marjean Crandall 230 Rock Creek West St Kellogg, Ia 50135-9602		2.00	
08/22/03	ID# CK#	Marjean Crandall 230 Rock Creek West St Kellogg, Ia 50135-9602		2.00	
09/05/03	ID# CK#	Marjean Crandall 230 Rock Creek West St Kellogg, Ia 50135-9602		2.00	
09/19/03	ID# CK#	Marjean Crandall 230 Rock Creek West St Kellogg, Ia 50135-9602		2.00	
10/03/03	ID# CK#	Marjean Crandall 230 Rock Creek West St Kellogg, Ia 50135-9602		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 16.00

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
SUB-TOTAL				\$ 10.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Anna Devilder 1414 350th Ave Brooklyn, Ia 52211		2.36	
08/08/03	ID# CK#	Anna Devilder 1414 350th Ave Brooklyn, Ia 52211		2.36	
08/22/03	ID# CK#	Anna Devilder 1414 350th Ave Brooklyn, Ia 52211		2.36	
09/05/03	ID# CK#	Anna Devilder 1414 350th Ave Brooklyn, Ia 52211		2.36	
09/19/03	ID# CK#	Anna Devilder 1414 350th Ave Brooklyn, Ia 52211		2.36	

SUB-TOTAL \$ 16.80

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
10/03/03	ID# CK#	Anna Devilder 1414 350th Ave Brooklyn, Ia 52211		2.36	
07/25/03	ID# CK#	Susan M Edelen 3630 90th St Grinnell, Ia 50112-8348		2.00	
08/08/03	ID# CK#	Susan M Edelen 3630 90th St Grinnell, Ia 50112-8348		2.00	
08/22/03	ID# CK#	Susan M Edelen 3630 90th St Grinnell, Ia 50112-8348		2.00	
09/05/03	ID# CK#	Susan M Edelen 3630 90th St Grinnell, Ia 50112-8348		2.00	
09/19/03	ID# CK#	Susan M Edelen 3630 90th St Grinnell, Ia 50112-8348		2.00	
10/03/03	ID# CK#	Susan M Edelen 3630 90th St Grinnell, Ia 50112-8348		2.00	
07/25/03	ID# CK#	Romaine K Fenner 4234 20th Street Grinnell, Ia 50112		3.71	
08/08/03	ID# CK#	Romaine K Fenner 4234 20th Street Grinnell, Ia 50112		3.71	
08/22/03	ID# CK#	Romaine K Fenner 4234 20th Street Grinnell, Ia 50112		3.71	

SUB-TOTAL \$ 25.49

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/05/03	ID# CK#	Romaine K Fenner 4234 20th Street Grinnell, Ia 50112		3.71	
09/19/03	ID# CK#	Romaine K Fenner 4234 20th Street Grinnell, Ia 50112		3.71	
10/03/03	ID# CK#	Romaine K Fenner 4234 20th Street Grinnell, Ia 50112		3.71	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	John S Flannery 1024 21st W. Des Moines, Ia 50265		12.50	

SUB-TOTAL \$ 29.63

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/08/03	ID# CK#	John S Flannery 1024 21st W. Des Moines, Ia 50265		12.50	
08/22/03	ID# CK#	John S Flannery 1024 21st W. Des Moines, Ia 50265		12.50	
09/05/03	ID# CK#	John S Flannery 1024 21st W. Des Moines, Ia 50265		12.50	
09/19/03	ID# CK#	John S Flannery 1024 21st W. Des Moines, Ia 50265		12.50	
10/03/03	ID# CK#	John S Flannery 1024 21st W. Des Moines, Ia 50265		12.50	
07/25/03	ID# CK#	Karen F Ford 472 Ewart Rd Grinnell, Ia 50112-8037		2.00	
08/08/03	ID# CK#	Karen F Ford 472 Ewart Rd Grinnell, Ia 50112-8037		2.00	
08/22/03	ID# CK#	Karen F Ford 472 Ewart Rd Grinnell, Ia 50112-8037		2.00	
09/05/03	ID# CK#	Karen F Ford 472 Ewart Rd Grinnell, Ia 50112-8037		2.00	
09/19/03	ID# CK#	Karen F Ford 472 Ewart Rd Grinnell, Ia 50112-8037		2.00	
<b>SUB-TOTAL</b>				\$ 72.50	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
10/03/03	ID# CK#	Karen F Ford 472 Ewart Rd Grinnell, Ia 50112-8037		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
<b>SUB-TOTAL</b>				\$ 11.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Ellen T Graff 700 Garfield St Tama, Ia 52339-2208		3.00	
08/08/03	ID# CK#	Ellen T Graff 700 Garfield St Tama, Ia 52339-2208		3.00	
08/22/03	ID# CK#	Ellen T Graff 700 Garfield St Tama, Ia 52339-2208		3.00	
09/05/03	ID# CK#	Ellen T Graff 700 Garfield St Tama, Ia 52339-2208		3.00	
09/19/03	ID# CK#	Ellen T Graff 700 Garfield St Tama, Ia 52339-2208		3.00	
10/03/03	ID# CK#	Ellen T Graff 700 Garfield St Tama, Ia 52339-2208		3.00	
07/25/03	ID# CK#	Andrew J Grosenbach 1116 Reed St Apt 101 Grinnell, Ia 50112-1338		5.00	

SUB-TOTAL \$ 26.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/08/03	ID# CK#	Andrew J Grosenbach 1116 Reed St Apt 101 Grinnell, Ia 50112-1338		5.00	
08/22/03	ID# CK#	Andrew J Grosenbach 1116 Reed St Apt 101 Grinnell, Ia 50112-1338		5.00	
09/05/03	ID# CK#	Andrew J Grosenbach 1116 Reed St Apt 101 Grinnell, Ia 50112-1338		5.00	
09/19/03	ID# CK#	Andrew J Grosenbach 1116 Reed St Apt 101 Grinnell, Ia 50112-1338		5.00	
10/03/03	ID# CK#	Andrew J Grosenbach 1116 Reed St Apt 101 Grinnell, Ia 50112-1338		5.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 30.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Traci A Guthrie 121 Adair St Kellogg, Ia 50135-1116		4.00	
08/08/03	ID# CK#	Traci A Guthrie 121 Adair St Kellogg, Ia 50135-1116		4.00	
08/22/03	ID# CK#	Traci A Guthrie 121 Adair St Kellogg, Ia 50135-1116		4.00	
09/05/03	ID# CK#	Traci A Guthrie 121 Adair St Kellogg, Ia 50135-1116		4.00	
09/19/03	ID# CK#	Traci A Guthrie 121 Adair St Kellogg, Ia 50135-1116		4.00	
10/03/03	ID# CK#	Traci A Guthrie 121 Adair St Kellogg, Ia 50135-1116		4.00	
09/19/03	ID# CK#	Ann M Hanssen PO Box 246 Kellogg, Ia 50135-0246		25.00	
10/03/03	ID# CK#	Ann M Hanssen PO Box 246 Kellogg, Ia 50135-0246		5.00	
07/25/03	ID# CK#	Brenda M Hassin 1105 Hamilton Ave Grinnell, Ia 50112-2444		5.00	
SUB-TOTAL				\$ 60.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

<b>COMMITTEE NAME</b> <i>(Must be same as on Statement of Organization)</i> <b>VERIZON IOWA STATE GOOD GOVERNMENT CLUB</b>
-------------------------------------------------------------------------------------------------------------------------------

**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
08/08/03	ID# CK#	Brenda M Hassin 1105 Hamilton Ave Grinnell, Ia 50112-2444		5.00	
08/22/03	ID# CK#	Brenda M Hassin 1105 Hamilton Ave Grinnell, Ia 50112-2444		5.00	
09/05/03	ID# CK#	Brenda M Hassin 1105 Hamilton Ave Grinnell, Ia 50112-2444		5.00	
09/19/03	ID# CK#	Brenda M Hassin 1105 Hamilton Ave Grinnell, Ia 50112-2444		5.00	
10/03/03	ID# CK#	Brenda M Hassin 1105 Hamilton Ave Grinnell, Ia 50112-2444		5.00	
07/25/03	ID# CK#	Cathy S Hedrick PO Box A Dallas, Ia 50062-0901		2.00	
08/08/03	ID# CK#	Cathy S Hedrick PO Box A Dallas, Ia 50062-0901		2.00	
08/22/03	ID# CK#	Cathy S Hedrick PO Box A Dallas, Ia 50062-0901		2.00	
09/05/03	ID# CK#	Cathy S Hedrick PO Box A Dallas, Ia 50062-0901		2.00	
09/19/03	ID# CK#	Cathy S Hedrick PO Box A Dallas, Ia 50062-0901		2.00	

SUB-TOTAL \$ 35.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
10/03/03	ID# CK#	Cathy S Hedrick PO Box A Dallas, Ia 50062-0901		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 11.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Peggy A Jantzen 522 9th Avenue Grinnell, Ia 50112		2.00	
08/08/03	ID# CK#	Peggy A Jantzen 522 9th Avenue Grinnell, Ia 50112		2.00	
08/22/03	ID# CK#	Peggy A Jantzen 522 9th Avenue Grinnell, Ia 50112		2.00	
09/05/03	ID# CK#	Peggy A Jantzen 522 9th Avenue Grinnell, Ia 50112		2.00	
09/19/03	ID# CK#	Peggy A Jantzen 522 9th Avenue Grinnell, Ia 50112		2.00	
10/03/03	ID# CK#	Peggy A Jantzen 522 9th Avenue Grinnell, Ia 50112		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
<b>SUB-TOTAL</b>				\$ 16.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00-	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 8.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

<b>COMMITTEE NAME</b> <i>(Must be same as on Statement of Organization)</i> <b>VERIZON IOWA STATE GOOD GOVERNMENT CLUB</b>
-------------------------------------------------------------------------------------------------------------------------------

**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
07/25/03	ID# CK#	Connie M Kempf 202 7th St Victor, Ia 52347		2.00	
08/08/03	ID# CK#	Connie M Kempf 202 7th St Victor, Ia 52347		2.00	
08/22/03	ID# CK#	Connie M Kempf 202 7th St Victor, Ia 52347		2.00	
09/05/03	ID# CK#	Connie M Kempf 202 7th St Victor, Ia 52347		2.00	
09/19/03	ID# CK#	Connie M Kempf 202 7th St Victor, Ia 52347		2.00	
10/03/03	ID# CK#	Connie M Kempf 202 7th St Victor, Ia 52347		2.00	
07/25/03	ID# CK#	Pamela L Kessler 255 420th Ave Grinnell, Ia 50112-1864		5.00	
08/08/03	ID# CK#	Pamela L Kessler 255 420th Ave Grinnell, Ia 50112-1864		5.00	
08/22/03	ID# CK#	Pamela L Kessler 255 420th Ave Grinnell, Ia 50112-1864		5.00	
09/05/03	ID# CK#	Pamela L Kessler 255 420th Ave Grinnell, Ia 50112-1864		5.00	
SUB-TOTAL				\$ 32.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Pamela L Kessler 255 420th Ave Grinnell, Ia 50112-1864		5.00	
10/03/03	ID# CK#	Pamela L Kessler 255 420th Ave Grinnell, Ia 50112-1864		5.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Kimberly K Kriegel 616 Main St Brooklyn, Ia 52211-9728		2.00	
08/08/03	ID# CK#	Kimberly K Kriegel 616 Main St Brooklyn, Ia 52211-9728		2.00	
SUB-TOTAL				\$ 20.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/22/03	ID# CK#	Kimberly K Kriegel 616 Main St Brooklyn, Ia 52211-9728		2.00	
09/05/03	ID# CK#	Kimberly K Kriegel 616 Main St Brooklyn, Ia 52211-9728		2.00	
09/19/03	ID# CK#	Kimberly K Kriegel 616 Main St Brooklyn, Ia 52211-9728		2.00	
10/03/03	ID# CK#	Kimberly K Kriegel 616 Main St Brooklyn, Ia 52211-9728		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 14.00

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

<b>COMMITTEE NAME</b> <i>(Must be same as on Statement of Organization)</i> <b>VERIZON IOWA STATE GOOD GOVERNMENT CLUB</b>
-------------------------------------------------------------------------------------------------------------------------------

**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
07/25/03	ID# CK#	Sharon L Krumm 15415 N 75th Ave E Grinnell, Ia 50112-7600		2.00	
08/08/03	ID# CK#	Sharon L Krumm 15415 N 75th Ave E Grinnell, Ia 50112-7600		2.00	
08/22/03	ID# CK#	Sharon L Krumm 15415 N 75th Ave E Grinnell, Ia 50112-7600		2.00	
09/05/03	ID# CK#	Sharon L Krumm 15415 N 75th Ave E Grinnell, Ia 50112-7600		2.00	
09/19/03	ID# CK#	Sharon L Krumm 15415 N 75th Ave E Grinnell, Ia 50112-7600		2.00	
10/03/03	ID# CK#	Sharon L Krumm 15415 N 75th Ave E Grinnell, Ia 50112-7600		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
<b>SUB-TOTAL</b>				<b>\$ 16.00</b>	
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Debra E Lewis 1202 Elm Street Grinnell, Ia 50112		3.98	
08/08/03	ID# CK#	Debra E Lewis 1202 Elm Street Grinnell, Ia 50112		3.98	
08/22/03	ID# CK#	Debra E Lewis 1202 Elm Street Grinnell, Ia 50112		3.98	
09/05/03	ID# CK#	Debra E Lewis 1202 Elm Street Grinnell, Ia 50112		3.98	
09/19/03	ID# CK#	Debra E Lewis 1202 Elm Street Grinnell, Ia 50112		3.98	
10/03/03	ID# CK#	Debra E Lewis 1202 Elm Street Grinnell, Ia 50112		3.98	
07/25/03	ID# CK#	Gayle H Light 1629 Reed St Grinnell, Ia 50112-2639		2.00	
08/08/03	ID# CK#	Gayle H Light 1629 Reed St Grinnell, Ia 50112-2639		2.00	

SUB-TOTAL \$ 29.88

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/22/03	ID# CK#	Gayle H Light 1629 Reed St Grinnell, Ia 50112-2639		2.00	
09/05/03	ID# CK#	Gayle H Light 1629 Reed St Grinnell, Ia 50112-2639		2.00	
09/19/03	ID# CK#	Gayle H Light 1629 Reed St Grinnell, Ia 50112-2639		2.00	
10/03/03	ID# CK#	Gayle H Light 1629 Reed St Grinnell, Ia 50112-2639		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 14.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Suzanne E McEltree 206 N East St Toledo, Ia 52342-1810		2.91	
08/08/03	ID# CK#	Suzanne E McEltree 206 N East St Toledo, Ia 52342-1810		2.91	
08/22/03	ID# CK#	Suzanne E McEltree 206 N East St Toledo, Ia 52342-1810		2.91	
09/05/03	ID# CK#	Suzanne E McEltree 206 N East St Toledo, Ia 52342-1810		2.91	

SUB-TOTAL \$ 17.64  
 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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Suzanne E McEltree 206 N East St Toledo, Ia 52342-1810		2.91	
10/03/03	ID# CK#	Suzanne E McEltree 206 N East St Toledo, Ia 52342-1810		2.91	
07/25/03	ID# CK#	Margery K McVay Box 935 Montezuma, Ia 50171		2.00	
08/08/03	ID# CK#	Margery K McVay Box 935 Montezuma, Ia 50171		2.00	
08/22/03	ID# CK#	Margery K McVay Box 935 Montezuma, Ia 50171		2.00	
09/05/03	ID# CK#	Margery K McVay Box 935 Montezuma, Ia 50171		2.00	
09/19/03	ID# CK#	Margery K McVay Box 935 Montezuma, Ia 50171		2.00	
10/03/03	ID# CK#	Margery K McVay Box 935 Montezuma, Ia 50171		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 19.82

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Rhonda R Moyes 302 2nd Ave Grinnell, Ia 50112-1813		4.00	
08/08/03	ID# CK#	Rhonda R Moyes 302 2nd Ave Grinnell, Ia 50112-1813		4.00	
08/22/03	ID# CK#	Rhonda R Moyes 302 2nd Ave Grinnell, Ia 50112-1813		4.00	
09/05/03	ID# CK#	Rhonda R Moyes 302 2nd Ave Grinnell, Ia 50112-1813		4.00	
09/19/03	ID# CK#	Rhonda R Moyes 302 2nd Ave Grinnell, Ia 50112-1813		4.00	
10/03/03	ID# CK#	Rhonda R Moyes 302 2nd Ave Grinnell, Ia 50112-1813		4.00	

SUB-TOTAL \$ 28.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Rebecca L Northcutt 705 E Wood St Box 819 Montezuma, Ia 50171		2.00	
08/08/03	ID# CK#	Rebecca L Northcutt 705 E Wood St Box 819 Montezuma, Ia 50171		2.00	
08/22/03	ID# CK#	Rebecca L Northcutt 705 E Wood St Box 819 Montezuma, Ia 50171		2.00	
09/05/03	ID# CK#	Rebecca L Northcutt 705 E Wood St Box 819 Montezuma, Ia 50171		2.00	

SUB-TOTAL \$ 14.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Rebecca L Northcutt 705 E Wood St Box 819 Montezuma, Ia 50171		2.00	
10/03/03	ID# CK#	Rebecca L Northcutt 705 E Wood St Box 819 Montezuma, Ia 50171		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Ellen J Olson 1013 Center St Grinnell, Ia 50112-1964		2.00	
08/08/03	ID# CK#	Ellen J Olson 1013 Center St Grinnell, Ia 50112-1964		2.00	

SUB-TOTAL \$ 14.00  
**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/22/03	ID# CK#	Ellen J Olson 1013 Center St Grinnell, Ia 50112-1964		2.00	
09/05/03	ID# CK#	Ellen J Olson 1013 Center St Grinnell, Ia 50112-1964		2.00	
09/19/03	ID# CK#	Ellen J Olson 1013 Center St Grinnell, Ia 50112-1964		2.00	
10/03/03	ID# CK#	Ellen J Olson 1013 Center St Grinnell, Ia 50112-1964		2.00	
07/25/03	ID# CK#	Linda M Pease 1108 Summer St Grinnell, Ia 50112-1751		5.00	
08/08/03	ID# CK#	Linda M Pease 1108 Summer St Grinnell, Ia 50112-1751		5.00	
08/22/03	ID# CK#	Linda M Pease 1108 Summer St Grinnell, Ia 50112-1751		5.00	
09/05/03	ID# CK#	Linda M Pease 1108 Summer St Grinnell, Ia 50112-1751		5.00	
09/19/03	ID# CK#	Linda M Pease 1108 Summer St Grinnell, Ia 50112-1751		5.00	
10/03/03	ID# CK#	Linda M Pease 1108 Summer St Grinnell, Ia 50112-1751		5.00	

SUB-TOTAL \$ 38.00

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Kim L Pfantz PO Box 375 Brooklyn, Ia 52211-0375		2.64	
08/08/03	ID# CK#	Kim L Pfantz PO Box 375 Brooklyn, Ia 52211-0375		2.64	
08/22/03	ID# CK#	Kim L Pfantz PO Box 375 Brooklyn, Ia 52211-0375		2.64	
09/05/03	ID# CK#	Kim L Pfantz PO Box 375 Brooklyn, Ia 52211-0375		2.64	
09/19/03	ID# CK#	Kim L Pfantz PO Box 375 Brooklyn, Ia 52211-0375		2.64	
10/03/03	ID# CK#	Kim L Pfantz PO Box 375 Brooklyn, Ia 52211-0375		2.64	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 19.84

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Jan K Pope 603 Van Horne Cir Grinnell, Ia 50112-1066		5.00	
08/08/03	ID# CK#	Jan K Pope 603 Van Horne Cir Grinnell, Ia 50112-1066		5.00	
08/22/03	ID# CK#	Jan K Pope 603 Van Horne Cir Grinnell, Ia 50112-1066		5.00	
09/05/03	ID# CK#	Jan K Pope 603 Van Horne Cir Grinnell, Ia 50112-1066		5.00	
09/19/03	ID# CK#	Jan K Pope 603 Van Horne Cir Grinnell, Ia 50112-1066		5.00	
10/03/03	ID# CK#	Jan K Pope 603 Van Horne Cir Grinnell, Ia 50112-1066		5.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 34.00

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Cynthia L Rose 1115 Reed St Apt 2w Grinnell, Ia 50112-1337		5.00	
08/08/03	ID# CK#	Cynthia L Rose 1115 Reed St Apt 2w Grinnell, Ia 50112-1337		5.00	
08/22/03	ID# CK#	Cynthia L Rose 1115 Reed St Apt 2w Grinnell, Ia 50112-1337		5.00	
09/05/03	ID# CK#	Cynthia L Rose 1115 Reed St Apt 2w Grinnell, Ia 50112-1337		5.00	
09/19/03	ID# CK#	Cynthia L Rose 1115 Reed St Apt 2w Grinnell, Ia 50112-1337		5.00	
10/03/03	ID# CK#	Cynthia L Rose 1115 Reed St Apt 2w Grinnell, Ia 50112-1337		5.00	

SUB-TOTAL \$ 34.00

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 10.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 10.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 10.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Margaret E Sieck 4220 Porter Addition Grinnell, Ia 50112		3.00	
08/08/03	ID# CK#	Margaret E Sieck 4220 Porter Addition Grinnell, Ia 50112		3.00	
08/22/03	ID# CK#	Margaret E Sieck 4220 Porter Addition Grinnell, Ia 50112		3.00	
09/05/03	ID# CK#	Margaret E Sieck 4220 Porter Addition Grinnell, Ia 50112		3.00	
09/19/03	ID# CK#	Margaret E Sieck 4220 Porter Addition Grinnell, Ia 50112		3.00	
10/03/03	ID# CK#	Margaret E Sieck 4220 Porter Addition Grinnell, Ia 50112		3.00	
07/25/03	ID# CK#	Michele L Sisson 1421 4th Ave Grinnell, Ia 50112		3.00	
08/08/03	ID# CK#	Michele L Sisson 1421 4th Ave Grinnell, Ia 50112		3.00	
08/22/03	ID# CK#	Michele L Sisson 1421 4th Ave Grinnell, Ia 50112		3.00	
09/05/03	ID# CK#	Michele L Sisson 1421 4th Ave Grinnell, Ia 50112		3.00	

SUB-TOTAL \$ 30.00

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Michele L Sisson 1421 4th Ave Grinnell, Ia 50112		3.00	
10/03/03	ID# CK#	Michele L Sisson 1421 4th Ave Grinnell, Ia 50112		3.00	
07/25/03	ID# CK#	Kathy V Stanek PO Box 926 Grinnell, Ia 50112-0926		2.50	
08/08/03	ID# CK#	Kathy V Stanek PO Box 926 Grinnell, Ia 50112-0926		2.50	
08/22/03	ID# CK#	Kathy V Stanek PO Box 926 Grinnell, Ia 50112-0926		2.50	
09/05/03	ID# CK#	Kathy V Stanek PO Box 926 Grinnell, Ia 50112-0926		2.50	
09/19/03	ID# CK#	Kathy V Stanek PO Box 926 Grinnell, Ia 50112-0926		2.50	
10/03/03	ID# CK#	Kathy V Stanek PO Box 926 Grinnell, Ia 50112-0926		2.50	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 23.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Susan Stevens 1107 E 12th St N Newton, Ia 50208		2.00	
08/08/03	ID# CK#	Susan Stevens 1107 E 12th St N Newton, Ia 50208		2.00	
08/22/03	ID# CK#	Susan Stevens 1107 E 12th St N Newton, Ia 50208		2.00	
09/05/03	ID# CK#	Susan Stevens 1107 E 12th St N Newton, Ia 50208		2.00	
09/19/03	ID# CK#	Susan Stevens 1107 E 12th St N Newton, Ia 50208		2.00	
10/03/03	ID# CK#	Susan Stevens 1107 E 12th St N Newton, Ia 50208		2.00	

SUB-TOTAL \$ 16.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Cheryl L Still 1625 3rd Avenue Grinnell, Ia 50112		4.00	
08/08/03	ID# CK#	Cheryl L Still 1625 3rd Avenue Grinnell, Ia 50112		4.00	
08/22/03	ID# CK#	Cheryl L Still 1625 3rd Avenue Grinnell, Ia 50112		4.00	
09/05/03	ID# CK#	Cheryl L Still 1625 3rd Avenue Grinnell, Ia 50112		4.00	
09/19/03	ID# CK#	Cheryl L Still 1625 3rd Avenue Grinnell, Ia 50112		4.00	
10/03/03	ID# CK#	Cheryl L Still 1625 3rd Avenue Grinnell, Ia 50112		4.00	
07/25/03	ID# CK#	Karen J Strovers 527 Harrison Ave Grinnell, Ia 50112-2328		2.00	
08/08/03	ID# CK#	Karen J Strovers 527 Harrison Ave Grinnell, Ia 50112-2328		2.00	
08/22/03	ID# CK#	Karen J Strovers 527 Harrison Ave Grinnell, Ia 50112-2328		2.00	
09/05/03	ID# CK#	Karen J Strovers 527 Harrison Ave Grinnell, Ia 50112-2328		2.00	

SUB-TOTAL \$ 32.00

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Karen J Strovers 527 Harrison Ave Grinnell, Ia 50112-2328		2.00	
10/03/03	ID# CK#	Karen J Strovers 527 Harrison Ave Grinnell, Ia 50112-2328		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 12.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 10.00

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 relative) 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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Jerilynn S Uitermarkt 1410 West South St Knoxville, Ia 50138		4.17	
08/08/03	ID# CK#	Jerilynn S Uitermarkt 1410 West South St Knoxville, Ia 50138		4.17	
08/22/03	ID# CK#	Jerilynn S Uitermarkt 1410 West South St Knoxville, Ia 50138		4.17	
09/05/03	ID# CK#	Jerilynn S Uitermarkt 1410 West South St Knoxville, Ia 50138		4.17	
09/19/03	ID# CK#	Jerilynn S Uitermarkt 1410 West South St Knoxville, Ia 50138		4.17	
10/03/03	ID# CK#	Jerilynn S Uitermarkt 1410 West South St Knoxville, Ia 50138		4.17	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 29.02

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 10.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

<b>COMMITTEE NAME</b> <i>(Must be same as on Statement of Organization)</i> <b>VERIZON IOWA STATE GOOD GOVERNMENT CLUB</b>
-------------------------------------------------------------------------------------------------------------------------------

**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
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Marlis R Van Zante 14017 Hwy 225 E Lynnville, Ia 50153-8560		2.00	
08/08/03	ID# CK#	Marlis R Van Zante 14017 Hwy 225 E Lynnville, Ia 50153-8560		2.00	
08/22/03	ID# CK#	Marlis R Van Zante 14017 Hwy 225 E Lynnville, Ia 50153-8560		2.00	
09/05/03	ID# CK#	Marlis R Van Zante 14017 Hwy 225 E Lynnville, Ia 50153-8560		2.00	
09/19/03	ID# CK#	Marlis R Van Zante 14017 Hwy 225 E Lynnville, Ia 50153-8560		2.00	
10/03/03	ID# CK#	Marlis R Van Zante 14017 Hwy 225 E Lynnville, Ia 50153-8560		2.00	

SUB-TOTAL \$ 16.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Marsha Vandekrol Box 403 New Sharon, Ia 50207		2.00	
08/08/03	ID# CK#	Marsha Vandekrol Box 403 New Sharon, Ia 50207		2.00	
08/22/03	ID# CK#	Marsha Vandekrol Box 403 New Sharon, Ia 50207		2.00	
09/05/03	ID# CK#	Marsha Vandekrol Box 403 New Sharon, Ia 50207		2.00	

SUB-TOTAL \$ 14.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
09/19/03	ID# CK#	Marsha Vandekrol Box 403 New Sharon, Ia 50207		2.00	
10/03/03	ID# CK#	Marsha Vandekrol Box 403 New Sharon, Ia 50207		2.00	
07/25/03	ID# CK#	Karla L Vanderleest 15270 N 75th Ave E Grinnell, Ia 50112-7601		2.00	
08/08/03	ID# CK#	Karla L Vanderleest 15270 N 75th Ave E Grinnell, Ia 50112-7601		2.00	
08/22/03	ID# CK#	Karla L Vanderleest 15270 N 75th Ave E Grinnell, Ia 50112-7601		2.00	
09/05/03	ID# CK#	Karla L Vanderleest 15270 N 75th Ave E Grinnell, Ia 50112-7601		2.00	
09/19/03	ID# CK#	Karla L Vanderleest 15270 N 75th Ave E Grinnell, Ia 50112-7601		2.00	
10/03/03	ID# CK#	Karla L Vanderleest 15270 N 75th Ave E Grinnell, Ia 50112-7601		2.00	
07/25/03	ID# CK#	Deborah D Walker 238 Horseshoe Drive Montezuma, Ia 50171		4.98	
08/08/03	ID# CK#	Deborah D Walker 238 Horseshoe Drive Montezuma, Ia 50171		4.98	

SUB-TOTAL \$ 25.96

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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
08/22/03	ID# CK#	Deborah D Walker 238 Horseshoe Drive Montezuma, Ia 50171		4.98	
09/05/03	ID# CK#	Deborah D Walker 238 Horseshoe Drive Montezuma, Ia 50171		4.98	
09/19/03	ID# CK#	Deborah D Walker 238 Horseshoe Drive Montezuma, Ia 50171		4.98	
10/03/03	ID# CK#	Deborah D Walker 238 Horseshoe Drive Montezuma, Ia 50171		4.98	
07/25/03	ID# CK#	David L Weaver 179 Walnut Road Grinnell, Ia 50112		2.00	
08/08/03	ID# CK#	David L Weaver 179 Walnut Road Grinnell, Ia 50112		2.00	
08/22/03	ID# CK#	David L Weaver 179 Walnut Road Grinnell, Ia 50112		2.00	
09/05/03	ID# CK#	David L Weaver 179 Walnut Road Grinnell, Ia 50112		2.00	
09/19/03	ID# CK#	David L Weaver 179 Walnut Road Grinnell, Ia 50112		2.00	
10/03/03	ID# CK#	David L Weaver 179 Walnut Road Grinnell, Ia 50112		2.00	
SUB-TOTAL				\$ 31.92	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

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

**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Diana J Webster 317 E 9th St N Newton, Ia 50208		2.94	
08/08/03	ID# CK#	Diana J Webster 317 E 9th St N Newton, Ia 50208		2.94	
08/22/03	ID# CK#	Diana J Webster 317 E 9th St N Newton, Ia 50208		2.94	
09/05/03	ID# CK#	Diana J Webster 317 E 9th St N Newton, Ia 50208		2.94	
09/19/03	ID# CK#	Diana J Webster 317 E 9th St N Newton, Ia 50208		2.94	
10/03/03	ID# CK#	Diana J Webster 317 E 9th St N Newton, Ia 50208		2.94	
07/25/03	ID# CK#	Joann L Wells 256 Newburg Road Grinnell, Ia 50112		2.00	
08/08/03	ID# CK#	Joann L Wells 256 Newburg Road Grinnell, Ia 50112		2.00	
08/22/03	ID# CK#	Joann L Wells 256 Newburg Road Grinnell, Ia 50112		2.00	
09/05/03	ID# CK#	Joann L Wells 256 Newburg Road Grinnell, Ia 50112		2.00	

SUB-TOTAL \$ 25.64

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

<b>COMMITTEE NAME</b> <i>(Must be same as on Statement of Organization)</i> <b>VERIZON IOWA STATE GOOD GOVERNMENT CLUB</b>
-------------------------------------------------------------------------------------------------------------------------------

**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
09/19/03	ID# CK#	Joann L Wells 256 Newburg Road Grinnell, Ia 50112		2.00	
10/03/03	ID# CK#	Joann L Wells 256 Newburg Road Grinnell, Ia 50112		2.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Unitemized Receipt		1.00	
08/08/03	ID# CK#	Unitemized Receipt		1.00	

SUB-TOTAL \$ 12.00

**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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

<b>COMMITTEE NAME</b> <i>(Must be same as on Statement of Organization)</i> <b>VERIZON IOWA STATE GOOD GOVERNMENT CLUB</b>
-------------------------------------------------------------------------------------------------------------------------------

**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
08/22/03	ID# CK#	Unitemized Receipt		1.00	
09/05/03	ID# CK#	Unitemized Receipt		1.00	
09/19/03	ID# CK#	Unitemized Receipt		1.00	
10/03/03	ID# CK#	Unitemized Receipt		1.00	
07/25/03	ID# CK#	Linda J Winchell 1617 3rd Ave Grinnell, Ia 50112-2124		2.00	
08/08/03	ID# CK#	Linda J Winchell 1617 3rd Ave Grinnell, Ia 50112-2124		2.00	
08/22/03	ID# CK#	Linda J Winchell 1617 3rd Ave Grinnell, Ia 50112-2124		2.00	
09/05/03	ID# CK#	Linda J Winchell 1617 3rd Ave Grinnell, Ia 50112-2124		2.00	
09/19/03	ID# CK#	Linda J Winchell 1617 3rd Ave Grinnell, Ia 50112-2124		2.00	
10/03/03	ID# CK#	Linda J Winchell 1617 3rd Ave Grinnell, Ia 50112-2124		2.00	
SUB-TOTAL				\$ 16.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\*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 relative) 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**  
**CONTRIBUTIONS -- MONEY TAKEN IN**

(including candidate's personal funds)

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

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

**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
07/25/03	ID# CK#	Theresa A Yoder 406 Clay St., P.O.box 82 Malcom, Ia 50157		2.91	
08/08/03	ID# CK#	Theresa A Yoder 406 Clay St., P.O.box 82 Malcom, Ia 50157		2.91	
08/22/03	ID# CK#	Theresa A Yoder 406 Clay St., P.O.box 82 Malcom, Ia 50157		2.91	
09/05/03	ID# CK#	Theresa A Yoder 406 Clay St., P.O.box 82 Malcom, Ia 50157		2.91	
09/19/03	ID# CK#	Theresa A Yoder 406 Clay St., P.O.box 82 Malcom, Ia 50157		2.91	
10/03/03	ID# CK#	Theresa A Yoder 406 Clay St., P.O.box 82 Malcom, Ia 50157		2.91	
SUB-TOTAL				\$ 17.46	
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 1,199.06</b>	

\*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 relative) 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>B</b>	MONETARY
(Rev. 09/97)	EXPENDITURES
<input checked="" 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)*  
**VERIZON IOWA STATE GOOD GOVERNMENT CLUB**

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE <i>(Disbursement)</i> WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/13/03	ID# CK# 00103	Lundby for Iowa Senate Mary Lundby 1240 14th Street Marion, Ia 52302	State Senate General 2004/sd26 Political Contribution	200.00
10/13/03	ID# CK# 00104	Murphy for State Representative Patrick Murphy 155 N Grandview Ave. Dubuque, Ia 52001	State House/legislature/rep General 2004/ia028 Political Contribution	400.00
SUB-TOTAL				\$ 600.00
<b>TOTAL <i>(if last page of this schedule)</i></b>				<b>\$ 600.00</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).)