

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 DISCLOSURE REPORT (Rev. 05/2002) For Office Use Only Comm. # 699 Indexed .9 Audited Computer

COMMITTEE NAME (Must be same as on Statement of Organization) Kettering Campaign IMPORTANT: Indicate type of committee you are reporting for: 1 (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates

CANDIDATE COMMITTEES ONLY: Candidate Name Steve Kettering Political Party Republican Office Sought State Senate District (if Senate or House) 26

JAN 20 2004 pm 1-15

SIGNATURE OF TREASURER (or person filing this report) [Signature]

712-657-3347 TELEPHONE

January 15, 2004 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 activity of 10-15 thru 12-31-03 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR. (report date) Indicate one 1

CHECK IF AMENDMENT TO REPORT DATED

Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$19,301.06), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 1,670.00, Schedule F: .00, Schedule H: .00), SUB-TOTAL (\$20,971.06), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: .00, Schedule F: .00), CASH ON HAND at the end of this reporting period (\$20,971.06).

Table with columns for description and amount. Rows include: **UNPAID BILLS (From Schedule D - Attach Schedule D) \$, **IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 4.25, **OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 10,700.00

CANDIDATE COMMITTEES ONLY: CONSULTANT BREAKDOWN (Schedule G Attached?) [] YES [X] NO VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$

For Instructions, See Back of Form

Reset Form

SCHEDULE A (Rev. 00/07)	MONETARY RECEIPTS
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

CONTRIBUTIONS – MONEY TAKEN IN
 (including candidate's personal funds)

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

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 60B.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
10/18/03	ID# CK# 2740	George Schneidermann Rock Rapids, IA 51246		\$ 25.00	<input type="checkbox"/>
10/18/03	ID# CK# 11651	James S. Haahr 1606 Shoreway Road Storm Lake, IA 50588		500.00	<input type="checkbox"/>
10/18/03	ID# CK# 6534	Frank Severino 4401 - 75th Street Des Moines, IA 50322		100.00	<input type="checkbox"/>
10/21/03	ID# CK# 5797	Keith Lazar 737 W. Monroe Washington, IA 52353-1635		100.00	<input type="checkbox"/>
10/21/03	ID# 6351 CK# 1123	Petroleum Marketers of Iowa 1303 - 50th West Des Moines, IA 50266		150.00	<input type="checkbox"/>
10/27/03	ID# CK# 5589	Jay Rehnstrom 611 - 8th Street Sioux Rapids, IA 50585		20.00	<input type="checkbox"/>
10/27/03	ID# CK# 1146	John Schmidt 1075 Bonnie Ct. Dubuque, IA 52002		25.00	<input type="checkbox"/>
11/4/03	ID# 6146 CK# 1507	Homebuilders Association PAC Des Moines, IA		200.00	<input type="checkbox"/>
11/4/03	ID# 6096 CK# 1761	Manufactured Housing PAC #6096 1400 Dean Ave Des Moines, IA 50316-3938		200.00	<input type="checkbox"/>
11/10/03	ID# 6445 CK# 1102	Riverpac 400 E. 3rd Street Dubuque, IA 52001-2395		100.00	<input type="checkbox"/>
SUB-TOTAL				1,420.00	
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 relatives) and affinity (relatives by marriage) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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Reset Form

SCHEDULE A (Rev. 00/07)	MONETARY RECEIPTS
	<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM

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

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

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CAUTION: Section 60B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
11/28/03	ID# CK# 5108	Stephen Goodenow 6903 Lake Shor Dr. Okoboji, IA 51355-5006		\$ 100.00	<input type="checkbox"/>
12/18/03	ID# 6486 CK# 1381	Iowa Telecom - ITPAC id 6486 115 S. 2nd Ave W. Newton, IA 50208		150.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				250.00	
TOTAL (if last page of this schedule)				\$1,670.00	

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SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Reset Form

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (If applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
12/17/03	Iowa Bankers Association 8800 NW 62nd Ave-PO Box 6200 Johnston, IA 50131-6200		cost for 46 thank you post cards	\$ 4.25	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 4.25	
TOTAL (if last page of this schedule)				\$ 4.25	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.