

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

pm JAN 12 2004
illeg

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1357</u>
Indexed	<u>2</u>
Audited	_____
Computer	_____

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

IMPORTANT: Indicate type of committee you are reporting for: 1

(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate
 (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee
 (8)Support State of Candidates

[Signature] 641-664-3370
 SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

1/8/04
 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 January 19, 2004 REPORT FOR AN/A (1) ELECTION /(2)NON-ELECTION YEAR.
 (report date) Indicate one 2

CHECK IF AMENDMENT TO REPORT DATED _____

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

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

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)\$ 305.10

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)..... 4,897.50

Schedule F: Loans Received total (Attach Schedule F)..... -0-

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... -0-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 5,202.60

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)..... 1,115.48

Schedule F: Loan Repayments total (Attach Schedule F)..... -0-

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$ 4,087.12

UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 99.16

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$ 327.00

OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$ 1,000.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES X NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)\$ -0-

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
02/05/03	ID# 6059 CK#	Iowa Comm Automotive Retailers 1111 Office Park RD West Des Moines, IA 50265		\$ 250.00	
05/27/03	ID# 6059 CK#	Iowa Comm Automotive Retailers 1111 Office Park RD West Des Moines, IA 50265		300.00	
10/13/03	ID# 6310 CK# 296	UFCW Local 230 1010 E. Williams Ottumwa, IA 52501		500.00	X
10/30/03	ID# CK# 4411	Patsy Cincotta 402 E. Walnut Centerville, IA 52544		40.00	X
10/30/03	ID# CK# 12433	Steve & Joy Evans 20528 Nuthatch Ave Bloomfield, IA 52537		50.00	X
10/30/03	ID# CK# 1216	Louise Frymoyer 301 Pine Ridge Bloomfield, IA 52537		30.00	X
10/30/03	ID# CK# 3853	Thomas Johnson P.O. Box 1045 Centerville, IA 52544		40.00	X
10/30/03	ID# CK#	Robert/Cheryll Jones 29743 Hwy 63 Bloomfield, IA 52537		32.00	X
10/30/03	ID# CK# 8717	Linda/Pat Perry PO BOX 21 Drakesville, IA 52552		25.00	X
10/30/03	ID# CK# 1078	Evan Peterson 319 - 3rd St SE Mt. Vernon, IA 52314		58.00	X

SUB-TOTAL
\$ 1,325.00

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.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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

SWAIM FOR HOUSE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/30/03	ID# CK# 1122	Lucia Swaim 12810 - 159th Trail, Box 77 Drakesville, IA 52552		\$ 30.00	X
10/30/03	ID# CK# 2481	Marcella Thompson 23072 195th St Bloomfield, IA 52537		31.00	X
11/07/03	ID# CK#	Bruce Braley 247 Sheridan RD Waterloo, IA 50701		100.00	X
11/07/03	ID# CK# 7268	Robert Burnett Jr 300 Walnut St, Suite 270 Des Moines, IA 50309		100.00	X
11/07/03	ID# CK# 2774	Dennis Chalupa 4 Chancery Ct Newton, IA 50208		100.00	X
11/07/03	ID# CK# 5884	Patrick Carpenter The Plaza, 300 Wlanut, Suite 270 Des Moines, IA 50309		100.00	X
11/07/03	ID# CK# 1065	James Cook 2 Silver Lake Drive Waterloo, IA 50702		25.00	X
11/07/03	ID# CK# 4552	Martin Diaz 525 S. Clinton St Iowa City, IA 52240		100.00	X
11/07/03	ID# CK# 2254	Tom/Julie Drew 712 - 50th St Des Moines, IA 50312		100.00	X
11/07/03	ID# CK# 7065	Edward Gallagher, III 801 Sheridan Rd Waterloo, IA 50701-4943		100.00	X

SUB-TOTAL

\$ 786.00

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.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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

SWAIM FOR HOUSE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
11/07/03	ID# CK# 1058	Marc Harding 3211 Lincoln Place Des Moines, IA 50312		\$ 100.00	X
11/07/03	ID# CK# 4018	Harlan/Linda Holm 808 S. Ellen Street Cedar Falls, IA 50613-2361		100.00	X
11/07/03	ID# CK# 5868	Deborah J. Hughes 2613 Meadowbrook DR SE Cedar Rapids, IA 52403-2929		25.00	X
11/07/03	ID# CK# 10760	Frederick James 3647 Red Oak Lane Cumming, IA 50061		100.00	X
11/07/03	ID# CK# 2020	Thomas/Jayne Hansen-Lipps PO BOX 5 Algona, IA 50511		25.00	X
11/07/03	ID# CK#	Doug Napier 818 Avenue "F" Fort Madison, IA 52627		25.00	X
11/07/03	ID# CK# 1975	Thomas A. Palmer 4090 Westown Parkway, Suite E West Des Moines, IAS 50266		100.00	X
11/07/03	ID# CK# 1311	John L. Riccolo 425 Second Street, SE, Suite 1140 Cedar Rapids, IA 52401		100.00	X
11/07/03	ID# CK# 6017	Robert Rush 4347 Eaglemere Court SE Cedar Rapids, IA 52403		100.00	X
11/07/03	ID# CK# 1948	Timothy/Jennifer Semelroth 2522 Meadowbrook Court SE Cedar Rapids, IA 52403		25.00	X
SUB-TOTAL				\$ 700.00	
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.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

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

SWAIM FOR HOUSE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
11/07/03	ID# CK# 5098	Tito/Peggy Trevino PO BOX 1680 Fort Dodge, IA 50501		\$ 100.00	X
11/07/03	ID# CK# 2143	Janece/Craig Valentine 319 Woodmar Heights Fort Dodge, IA 50501		100.00	X
11/07/03	ID# CK# 5721	William/Jane Wimmer 3504 129th St Urbandale, IA 50323		50.00	X
11/24/03	ID# 6070 CK#	Iowa Lawpac 521 East Locust, St., FL 3rd Des Moines, IA 50309-1939		200.00	
11/26/03	ID# CK# 7740	Maggi Moss 2905 Gilmore Ave Des Moines, IA 50312		100.00	
11/26/03	ID# CK# 5072	Thomas/Jennifer Wertz 228 Lincoln Heights Drive Cedar Rapids, IA 52403-3282		100.00	
11/26/03	ID# 6113 CK#	AFSCME/Iowa Council 61 4320 N.W. 2nd Ave Des Moines, IA 50313		200.00	
11/28/03	ID# CK# 4491	Wright Law Firm 702 Avenue F, Suite 1 Fort Madison, IA 52627		50.00	
12/05/03	ID# 6429 CK#	Heavy Highway PAC 2415 Ingersoll Avenue Des Moines, IA 50312-5233		100.00	
	ID# CK#				

SUB-TOTAL

\$1,000.00

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.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization) SWAIM FOR HOUSE
--

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
12/11/03	ID# CK# 2859	Marcella Frevert 3655 - 450th Ave, PO Box 324 Emmetsburg, IA 50536		\$ 50.00	X
12/11/03	ID# 6118 CK#	Iowa Optometric Association 1454 30th Street, Suite 204 West Des Moines, IA 50266		150.00	X
12/11/03	ID# CK# 3727	James Obradovich 2318 35th St Des Moines, IA 50310		25.00	X
12/11/03	ID# CK# 7327	David/Patricia Palmer 213 SW Flynn Drive Ankeny, IA 50021		50.00	X
12/11/03	ID# CK#	Sheri Schnell 1703 Kennedy St. Granger, IA 50109		30.00	X
12/11/03	ID# CK# 4666	Cecilia J. Tomlonovic 1245 40th St Des Moines, IA 50311		25.00	X
12/12/03	ID# 6067 CK#	Iowa Health PAC# 6067 6750 Westown Parkway West Des Moines, IA 50321-1839		100.00	
12/12/03	ID# CK# 3209	Carlos Jayne 3523 SW 37th ST Des Moines, IA 50321-1839		25.00	
12/15/03	ID# 6087 CK#	Iowa Telecommunications Industry 2987 - 100th St Urbandale, IA 50322-5501		100.00	
12/15/03	ID# CK# 1665	Arthur/Janet Hedberg 1716 E. 31st Court Des Moines, IA 50317		100.00	
SUB-TOTAL				\$ 655.00	
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.

For Instructions, See Back of Form

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

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

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

SWAIM FOR HOUSE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
12/15/03	ID# CK#	Paul McAndrew Law Firm 2598 Holiday Rd Suite 100 Coralville, IA 52241		\$ 100.00	
12/16/03	ID# 6237 CK#	Abate PAC #6237 601 Highland Acres Road Marshalltown, IA 50158		100.00	
Various	ID# CK#	Unitemized receipts for period through December 31st for contributions not exceeding \$25.00 per person		231.50	
	ID# CK#				
SUB-TOTAL				\$ 431.50	
TOTAL (if last page of this schedule)				\$ 4,897.50	

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

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

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

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01/06/03	ID# CK# 1072	Corydon Times Republican 205 W. Jackson Corydon, IA 50060	Advertising	\$ 28.00
02/07/03	ID# CK# 1073	Iowa Comm Automotive Retailers 1111 Office Park Rd West Des Moines, IA 50265	Refund of contribution mistakenly delivered during session	250.00
02/13/03	ID# CK# 1074	Carter Printing 1739 East Grand Avenue Des Moines, IA 50316	Stationery	82.68
07/03/03	ID# CK# 1075	Pamida 106 Smith St Bloomfield, IA 52537	Candy	68.74
08/20/03	ID# CK# 1076	Iowa Civil Justice Foundation 218 6th Avenue, Suite 526 Des Moines, IA 50309	Donate to 401(c)(3) Non-Profit Corporation in connection with Ragori Promotion	349.50
09/05/03	ID# CK# 1077	Wal-Mart 1940 Venture Drive Ottumwa, IA 52501	Candy	48.98
10/28/03	ID# CK# 1078	Get-Together Room 107 E. Jefferson St Bloomfield, IA 52537	Room Rental for Fund Raiser	25.00
10/30/03	ID# CK# 1079	U.S. Postal Service 202 W. Jefferson St Bloomfield, IA 52537	Postage Stamps	37.00
SUB-TOTAL				\$ 889.90
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

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

SWAIM FOR HOUSE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/30/03	ID# CK# 1080	Bloomfield Communications 207 S. Madison St Bloomfield, IA 52537	Advertising for Fund Raiser	\$ 70.00
11/28/03	ID# CK# 1081	Carter Printing 1739 East Grand Avenue Des Moines, IA 50316	Printing of Invitations for Fund Raiser in Des Moines	102.29
12/05/03	ID# CK# 1082	Ad Express/Daily Iowegian PO Box 610 Centerville, IA 52544	Advertising for Fund Raiser	53.29
	ID# CK#			
SUB-TOTAL				\$ 225.58
TOTAL (if last page of this schedule)				\$ 1,115.48

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).)

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

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

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1,000.00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

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

TOTAL (PART I) \$ _____

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

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

TOTAL CASH REPAYMENTS (PART II) \$ 0.00

From Schedule E - TOTAL LOANS FORGIVEN \$ 0.00

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,000.00

*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 when it applies.