

07002 3150 0005 2971 9645

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2003) DISCLOSURE REPORT. For Office Use Only: Comm. # 6033, Logged In SW Stack, Scanned, Computer, Audited.

COMMITTEE NAME (Must be same as on Statement of Organization) Employers Mutual Casualty Co. Political Action Comm. for Responsible State Govt. IMPORTANT: Indicate type of committee you are reporting for: 2

CANDIDATE COMMITTEES ONLY: Candidate Name, Office Sought, Political Party, District (if Senate or House). Includes a stamp: MAY 18 2004 Certified FILED pm 5-17.

SIGNATURE OF TREASURER (or person filing this report) [Signature] TELEPHONE [515] 280-2950 DATE SIGNED 5-13-04

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

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A May 19, 2004 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 (\$ 819.37), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 2,160.45, Schedule F: 0, Schedule H: 0), SUB-TOTAL (\$ 2,979.82), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: 575.00, Schedule F: 0), CASH ON HAND at the end of this reporting period (\$ 2,404.82), **UNPAID BILLS (\$ 0), *IN KIND CONTRIBUTIONS (\$ 0), **OUTSTANDING LOANS (\$ 0), CANDIDATE COMMITTEES ONLY, CONSULTANT BREAKDOWN (YES/NO), VALUE OF CAMPAIGN PROPERTY (\$).

For Instructions, See Back of Form



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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov

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
01/02, 01/13, 01/30, 02/13, 02/27, 03/03, 04/09, 04/23/04	ID# CK#	Ron Herman 1209 Bentwood Ct Altoona, IA 9 x \$2.50 =		\$22.50	<input type="checkbox"/>
"	ID# CK#	Greg Christianson 7819 Hwy 5 52 N Baxter, IA 50028 9 x \$3.46 =		31.14	<input type="checkbox"/>
"	ID# CK#	Heather Boustead 7618 Madison Ave Des Moines, IA 9 x \$3.50 =		31.50	<input type="checkbox"/>
"	ID# CK#	James Dawson 9017 Ridgeview Dr Johnston, IA 50131 9 x \$2.00 =		18.00	<input type="checkbox"/>
"	ID# CK#	David Grzeskowiec 4400 Park Ave., #16 Des Moines, IA 50321 9 x \$1.25 =		11.25	<input type="checkbox"/>
"	ID# CK#	Martin Reed 737 E Walnut, #29 Elkhart, IA 50073 9 x \$3.00 =		27.00	<input type="checkbox"/>
"	ID# CK#	Adam Rourke 386 215th Ave Hartford, IA 50118 9 x \$2.50 =		22.50	<input type="checkbox"/>
"	ID# CK#	Crystal St. Clair 2473 Pacific St New Virginia, IA 50210 9 x \$3.25 =		29.25	<input type="checkbox"/>
"	ID# CK#	Denise Mernka 4328 New York Ave Des Moines, IA 50310 9 x \$1.50 =		13.50	<input type="checkbox"/>
"	ID# CK#	Mike Hanback 4212 Adams Des Moines, IA 50310 9 x \$3.25 =		29.25	<input type="checkbox"/>
SUB-TOTAL				\$ 235.89	
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). 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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(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
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01/02, 01/16, 01/30, 02/13, 02/27, 03/10, 04/09, 04/23, 04/26	ID# CK#	Joe Smith 6885 Sharon Drive Urbandale, IA 50322 9 x \$5.00 =		\$ 45.00	<input type="checkbox"/>
"	ID# CK#	Ken Cumpston 1900 NW 152nd St Clive, IA 50325 9 x \$2.50 =		22.50	<input type="checkbox"/>
"	ID# CK#	Dave Hixenbaugh 4903 Lakewood Dr Norwalk, IA 50211 9 x \$3.25 =		29.25	<input type="checkbox"/>
"	ID# CK#	Mike Bloomberg 4638 Elm West Des Moines, IA 50265 9 x \$1.00 =		9.00	<input type="checkbox"/>
"	ID# CK#	Ron Hallenbeck 5880 Brentwood Johnston, IA 9 x \$3.25 =		29.25	<input type="checkbox"/>
"	ID# CK#	Doug Nuehring 14430 Bryn Mawr Urbandale, IA 50323 9 x \$1.00 =		9.00	<input type="checkbox"/>
"	ID# CK#	Curtis Husske 300 Baldwin St Maxwell, IA 50161 9 x \$3.00 =		27.00	<input type="checkbox"/>
"	ID# CK#	Nick Kolacia 8817 Hickman Rd., Apt. 704 Urbandale, IA 50322 9 x \$10.00 =		90.00	<input type="checkbox"/>
"	ID# CK#	John Power 217 Elm Ave Story City, IA 9 x \$5.00 =		45.00	<input type="checkbox"/>
"	ID# CK#	Georgia Rhoades 3633 Cornell Des Moines, IA 50313 9 x \$10.00 =		90.00	<input type="checkbox"/>

SUB-TOTAL

\$ 396.00

TOTAL (if last page of this schedule)

\$

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov

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01/02, 01/11, 01/30, 02/13, 02/27, 03/18, 04/09, 04/23/04	ID# CK#	Nathan Habben 210 S Prairie View Dr., Apt. 837 West Des Moines, IA 9 x \$3.25 =		\$ 29.25	<input type="checkbox"/>
"	ID# CK#	Mike Freal 4213 E Euclid Des Moines, IA 9 x \$3.25 =		29.25	<input type="checkbox"/>
"	ID# CK#	Bob Morlan 3404 Wakonda Ct Des Moines, IA 50321 9 x \$3.75 =		33.75	<input type="checkbox"/>
"	ID# CK#	Monte Ball 304 41st St Des Moines, IA 9 x \$5.00 =		45.00	<input type="checkbox"/>
"	ID# CK#	Mark McColley 8901 Boston Ave Urbandale, IA 50322 9 x \$3.20 =		28.80	<input type="checkbox"/>
"	ID# CK#	Herb Suffel 990 3rd Waukee, IA 50263 9 x 3.75 =		33.75	<input type="checkbox"/>
"	ID# CK#	Rob Friedman 9390 Lakewood Circle Norwalk, IA 50211 9 x \$3.25 =		29.25	<input type="checkbox"/>
"	ID# CK#	Carol Hallenbeck 5880 Brentwood Johnston, IA 9 x \$1.50 =		13.50	<input type="checkbox"/>
"	ID# CK#	Beech Turner 1904 75th St Des Moines, IA 50322 9 x \$2.89 =		26.01	<input type="checkbox"/>
"	ID# CK#	Sharon Gentsch 408 Lacona Des Moines, IA 50315 9 x \$1.00 =		9.00	<input type="checkbox"/>
SUB-TOTAL				\$ 277.56	
TOTAL (if last page of this schedule)				\$	

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(Including candidate's personal funds)

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

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01/02, 01/10, 01/30, 02/13, 02/27, 03/12, 03/26, 04/09, 04/23/04	ID# CK#	Leann Goebel 2608 68th St Urbandale, IA 50322 9 x \$3.25 =		\$ 29.25	<input type="checkbox"/>
"	ID# CK#	Joan Bolin 3419 St. Johns Rd Des Moines, IA 9 x \$3.50 =		31.50	<input type="checkbox"/>
"	ID# CK#	Joe Burkle 14421 Bryn Mawr Urbandale, IA 50323 9 x \$1.75 =		15.75	<input type="checkbox"/>
"	ID# CK#	Jean Bloomburg 4638 Elm West Des Moines, IA 50265 9 x \$2.50 =		22.50	<input type="checkbox"/>
"	ID# CK#	Susan Cauterucci 1720 19th Pl West Des Moines, IA 9 x \$3.25 =		29.25	<input type="checkbox"/>
"	ID# CK#	Ron Paine 10577 Elmcrest Dr West Des Moines, IA 50325 9 x \$3.50 =		31.50	<input type="checkbox"/>
"	ID# CK#	Ray Davis 12926 Timberline Dr Urbandale, IA 50323 9 x \$3.27 =		29.43	<input type="checkbox"/>
"	ID# CK#	Kevin Hovick 13560 Lake Shore Dr Clive, IA 50325 9 x \$2.50 =		22.50	<input type="checkbox"/>
"	ID# CK#	Ron Jean 2214 Ridgewood Dr Altoona, IA 9 x \$5.50 =		49.50	<input type="checkbox"/>
"	ID# CK#	Bruce Kelley 14 Glenview Dr Des Moines, IA 50312 9 x \$19.23 =		173.07	<input type="checkbox"/>
SUB-TOTAL				\$ 434.25	
TOTAL (if last page of this schedule)				\$	

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(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
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01/02, 01/10, 01/30, 02/13, 02/27, 03/13, 04/09, 04/23/04	ID# CK#	William A. Murray 1770 Birchwood Circle Waukee, IA 50263 9 x \$3.50 =		\$ 31.50	<input type="checkbox"/>
"	ID# CK#	Dave Narigon P. O. Box 308 Monroe, IA 50170 9 x \$15.00 =		135.00	<input type="checkbox"/>
"	ID# CK#	Dennis Christy 1801 NW 81st St Clive, IA 50325 9 x \$3.25 =		29.25	<input type="checkbox"/>
"	ID# CK#	Lonnie Schwab P. O. Box 475 Waukee, IA 50263 9 x \$3.25 =		29.25	<input type="checkbox"/>
"	ID# CK#	Jim Fontanini 929 43rd St West Des Moines, IA 50265 9 x \$6.00 =		54.00	<input type="checkbox"/>
"	ID# CK#	Tina Brennecke 4560 Bartholomew Dr Pleasant Hill, IA 50327 9 x \$1.25 =		11.25	<input type="checkbox"/>
"	ID# CK#	Tim Wylder 8512 Horton Ave Des Moines, IA 9 x \$3.75 =		33.75	<input type="checkbox"/>
"	ID# CK#	Jerry McClelland 9609 Tanglewood Dr Urbandale, IA 50322 9 x \$5.00 =		45.00	<input type="checkbox"/>
"	ID# CK#	Bob Neswold 187 52nd St West Des Moines, IA 50265 9 x \$3.50 =		31.50	<input type="checkbox"/>
"	ID# CK#	Scott Behrens 416 Grand Ave West Des Moines, IA 50265 9 x \$1.50 =		13.50	<input type="checkbox"/>

SUB-TOTAL
\$ 414.00
TOTAL (if last page of this schedule)
\$

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Employers Mutual Casualty Co. Political Action Comm. for Responsible State Gov

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01/02, 01/10, 01/30, 02/13, 02/27, 03/12, 03/26, 04/09, 04/23/04	ID# CK#	Andrea McFadyen 3203 SW Court Ave Ankeny, IA 50021 9 x \$1.50 =		\$ 13.50	<input type="checkbox"/>
"	ID# CK#	Debra Cunningham 1804 57th St Des Moines, IA 50310 9 X \$3.25 =		29.25	<input type="checkbox"/>
04/21/04	ID# CK#	Ellen Moore 2389 S Lakeview Dr Greenfield, IA 50849		12.50	<input type="checkbox"/>
04/26/04	ID# CK#	Ross Sales 724 46th Street West Des Moines, IA 50265		50.00	<input type="checkbox"/>
04/26/04	ID# CK#	Paul Mack 1320 7th Street Nevada, IA 50201		12.50	<input type="checkbox"/>
04/27/04	ID# CK#	Carol Conner 309 W Hutchings Street Winterset, IA 50273		10.00	<input type="checkbox"/>
04/27/04	ID# CK#	Randy Dickey 15427 Winston Avenue Urbandale, IA 50323		12.50	<input type="checkbox"/>
04/30/04	ID# CK#	Bob Link 214 NE 64th Street Des Moines, IA 50327-9125		62.50	<input type="checkbox"/>
05/03/04	ID# CK#	Don Klemme 3908 Muskogee Avenue Des Moines, IA 50312		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL	\$ 402.75
TOTAL (if last page of this schedule)	\$ 2,160.45

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

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

COMMITTEE NAME *(Must be same as on Statement of Organization)*
 Employers Mutual Casualty Co. Political Action Comm. for Responsible State Government

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
01-08-04	ID# CK# 1025	Iowa House Truman Fund Iowa Democratic Party 5661 Fleur Drive	Contribution	\$ 25.00
04-21-04	ID# ⁹⁶⁴ CK# 1026	Angelo for Senate 808 West Jefferson Creston, IA 50801	Campaign Contribution	100.00
04-21-04	ID# ⁹³¹ CK# 1027	Iverson for Senate 3020 Dows-Williams Rd Dows, IA 50071	Campaign Contribution	100.00
04-21-04	ID# ¹¹⁶⁹ CK# 1028	Lamberti for Senate 2621 NW 17th St Ankeny, IA 50021	Campaign Contribution	100.00
04-22-04	ID# 1088 CK# 1029	Horbach for House of Representatives 1014 Oakland Dr Tama, IA 52339	Campaign Contribution	150.00
05-06-04	ID# ⁹⁶⁵ CK# 1030	McKibben for Senate Committee P. O. Box 308 Marshalltown, IA 50158	Campaign Contribution	100.00
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 575.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

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

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)