

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	1400
Logged In	<i>[Signature]</i>
Scanned	
Computer	
Audited	

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

IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name: *Jinda Upmeyer* Political Party (if applicable): *Republican*
 Office Sought: *House* District (if Senate or House): *12*

Late reports are subject to possible civil and criminal penalties.

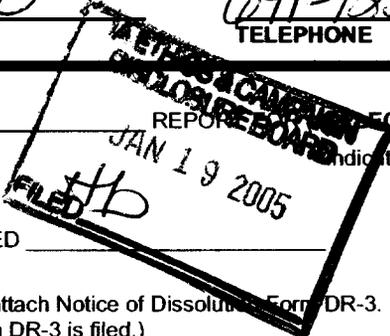
Jinda Upmeyer *641-933-3398* *1/18/05*
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A *Jan 19* (report date) REPORT SECTION # NON-ELECTION YEAR.
 Indicate by #

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 DR-3 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. (Total of all funds 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.) \$ *18,025.99*

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) *5,325.00*

Schedule F: Loans Received total (Attach Schedule F) *—*

Schedule H: Total Sales of Campaign Property (Attach Schedule H) *—*

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ *23,450.99*

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... *11,407.43*

Schedule F: Loan Repayments total (Attach Schedule F) *~~12,043.56~~*

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3) \$ *12,043.56*

****UNPAID BILLS** (From Schedule D - Attach Schedule D) \$ *7565.05*

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$ *7493.52*

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

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

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

For Instructions, See Back of Form

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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

Comney for House

CHECK THIS BOX IF AMENDING FORM

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
10/28/04	ID# CK# 794	<i>Lois Bartelme</i> 323 South Ridge Dr, Coralville, IA 52241		\$ 50.00	<input type="checkbox"/>
10/28/04	ID# CK# 2162	<i>Iowa Independent Bankers PAC</i> 1603 22nd St. Suite 202 West Des Moines, IA 50266		20.00	<input type="checkbox"/>
10/28/04	ID# CK# 1943	<i>Thomas Schaefer</i> 1 Briarstone Ct. Mason City, IA 50401		500.00	<input type="checkbox"/>
10/28/04	ID# CK# 5043	<i>Bradley Price</i> 1423 N. Shore Dr. Clear Lake, IA 50428		50.00	<input type="checkbox"/>
10/28/04	ID# CK# 6505	<i>Hawn Southwick</i> 495 18th St W Clear Lake, IA 50428		50.00	<input type="checkbox"/>
10/28/04	ID# CK# 5613	<i>Kevin Mallett</i> 1410 Poplar St. Clear Lake, IA 50428		100.00	<input type="checkbox"/>
10/28/04	ID# CK#	<i>Roger Schmitt</i> 44 Golf View Ct Garner, IA 50438		200.00	<input type="checkbox"/>
10/30/04	ID# CK# 2934	<i>Iowa Soft Drink PAC</i> 801 Grand, Ste 3100 Des Moines, IA 50309		250.00	<input type="checkbox"/>
10/30/04	ID# CK#	<i>Thomas Louell</i> 545 N. Shore Dr. Clear Lake, IA 50428		100.00	<input type="checkbox"/>
10/30/04	ID# CK#	<i>Juan Govenmeier</i> 475 W. 12th St. Garner, IA 50438	<i>Aunt</i>	25.00	<input type="checkbox"/>

SUB-TOTAL

\$ 1525.00

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). 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

Reset Form

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Lipomeyer 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
10/30/04	ID# CK#	Charles H. McNeider PO Box 643 Mason City, IA 50402		\$ 1000.00	<input type="checkbox"/>
11/2/04	ID# CK#	Curtis Luerke 401 N. Shore Dr. Clear Lake, IA 50428		500.00	<input type="checkbox"/>
11/2/04	ID# CK#	Socrates Pappajohn Beaumont Dr. Mason City, IA 50401		100.00	<input type="checkbox"/>
11/2/04	ID# CK#	Pamela Cobb 1615 N. Shore Dr. Clear Lake, IA 50428		500.00	<input type="checkbox"/>
11/2/04	ID# CK#	J. D. Wilson Box 3 Clear Lake, IA 50428		100.00	<input type="checkbox"/>
11/2/04	ID# CK#	Kevin Rios La Calleja Circle Mason City, IA 50401		100.00	<input type="checkbox"/>
11/6/04	ID# 6042 CK# 1183	Procers Political Action Committee 2340 106th St. Ste 102 Des Moines, IA 50322		250.00	<input type="checkbox"/>
11/8/04	ID# CK#	John T. Fynch PO Box 810 Clear Lake, IA 50428		500.00	<input type="checkbox"/>
11/8/04	ID# CK#	David R. England 145 East O. St. Forest City, IA 50436		100.00	<input type="checkbox"/>
12/15/04	ID# CK#	Edward Friedmann PO Box C Redfield, IA 50233		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 3350.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

Reset Form

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Upmeyer 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
<i>12/12/04</i>	ID# CK#	<i>Jeffrey Nicholas 715 N. State St. #129 Clear Lake, IA 50512</i>		<i>\$ 100.00</i>	<input type="checkbox"/>
<i>12/27/04</i>	ID# <i>6078</i> CK# <i>1621</i>	<i>Iowa Physical Therapy PAC 1228 8th St, Suite 106 West Des Moines, IA 50265</i>		<i>100.00</i>	<input type="checkbox"/>
<i>12/30/04</i>	ID# CK# <i>491</i>	<i>Smithfield Foods PAC 499 Park Ave. New York, NY 10022</i>		<i>250.00</i>	<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 *\$ 450.00*
TOTAL (if last page of this schedule) *\$ 5325.00*

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Upmeyer 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
10/27/04	ID# CK# 1217	RPI-LMF 655 E 9th St. Des Moines, IA 50309	Contribution	\$ 5000.00
11/02/04	ID# CK# 1218	Bills Family Foods 255 Huray 18 W. Gurnee, IA 50438	food for volunteer event	15.41
11/04/04	ID# CK# 1219	Sheffield Press 30 W. Gilman St. Sheffield, IA	election advertising	231.00
11/04/04	ID# CK# 1220	Hampton Publishing 9 S. West St. NW Hampton, IA	election advertising	361.20
11/04/04	ID# CK# 1221	Garner Leader 365 State St. Gurnee, IA 50438	election ads	316.11
11/04/04	ID# CK# 1222	So. County News 308 Main St. Thornton, IA	election ads	185.22
11/04/04	ID# CK# 1223	Clear Lake Mirror 12 N. 4th St. Clear Lake, IA 50428	election ads	400.00
11/04/04	ID# CK# 1225	North Ia. Media P.O. Box 271 Mason City, Ia 50401	election ads	36.10
SUB-TOTAL				\$ 6545.04
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 68A.402(3)(i).)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Womyn 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
11/05/04	ID# CK# 1226	Sheffield News 305 German St. Sheffield, IA	election thank you	\$ 33.00
11/08/04	ID# CK# 1227	Postmaster 190 E. 3rd St. Garner, Ia 50438	Stamps	74.00
11/12/04	ID# CK# 1228	Target 3450 4th St. SW Mason City, IA 50401	Candy to volunteer mtg	10.54
11/13/04	ID# CK# 1229	Clear Lake EDC 205 5th St. Clear Lake, IA 50408	Quarterly luncheon	9.50
11/14/04	ID# CK# 1230	Older Woman Legislature 200 10th St Clemens 8th P.O. Box 50309-3609	membership	25.00
11/14/04	ID# CK# 1231	Dampston Publishing 9 2nd St. NW Dampston, IA 50441	Election thank-you ad	51.60
11/14/04	ID# CK# 1232	Farm Bureau Spokesman 175 W. 3rd St. Garner, IA 50438	Subscription	18.00
11/14/04	ID# CK# 1233	Garner Trade Signal 365 State St. Garner, IA 50438	Subscription	30.00
SUB-TOTAL				\$ 251.64
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 68A.402(3)(i).)

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Upmeyer 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
11/20/04	ID# CK# 1234	Kanawha Reporter 101 N. Main St. Mason City, IA 50401	Election Ads	\$ 177.00
11/25/04	ID# CK# 1235	Staples 3450 4th St. SW Mason City, IA 50401	Note cards (thank-yous)	29.90
12/7/04	ID# CK# 1236	Staples 3450 4th St. SW Mason City, IA 50401	Staples Fax/Scanner Copier office equip.	427.98
12/13/04	ID# CK# 1237	Best Buy 440 Indian Head Dr. Mason City, IA 50401	Portable Computer memory Card	53.49
12/17/04	ID# CK# 1238	State of Ia, Treas. State Capitol Des Moines, IA 50309	"Iowa" pins for constituents	80.00
12/30/04	ID# CK# 1239	So. County News 308 Main St. Jenison, IA	election "thank-you" ad	23.52
12/30/04	ID# CK# 1240	Garner Leader 365 State St. Garner, IA 50438	election's thank-you ad	42.84
12/30/04	ID# CK# 1241	Doug Upmeyer 2175 Pine Ave Garner, IA 50438	re-imburse for 2 file cabinets, picked up at Staples	278.18
SUB-TOTAL				\$ 1112.91
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 68A.402(3)(i).)

Reset Form

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

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

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)
Lipmeyer 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
12/31/04	ID# CK# 1242	Staples 3450 4th St SW Mason City, IA 50401	Calendar for 2005	\$ 33.66
12/30/04	ID# CK# 1243	Clear Lake Miproz 12 N. 4th St. Clear Lake, IA 50428	election thank-you ad	61.36
12/30/04	ID# CK# 1244	Jinda Lipmeyer 2175 Pine Ave. Garner, IA 50438	ALEC Summit - pt expenses - hotel, air, registration	863.46
12/30/04	ID# CK# 1245	Clear Lake Chamber 205 Main St Clear Lake, IA 50428	membership	62.00
12/31/04	ID# CK# 1246	RPI 621 E. 9th St. Des Moines IA 50309	membership & contribution	500.00
12/31/04	ID# CK# 1250	Jinda Lipmeyer 2175 Pine Ave Garner, IA 50438	reimb. for debt from schedule D	1649.52
12/31/04	ID# CK# 1247	Jinda Lipmeyer 2175 Pine Ave Garner, IA 50438	reimb. for meals for meetings in 2004	128.47
12/31/04	ID# CK# 1248	Postmaster 190 E. 3rd St. Garner, IA 50438	Postage	74.00
SUB-TOTAL				\$ 3366.47
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 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
L. Meyer for House

Reset Form

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING 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
10/30/04	LMF-RPI 621 E. 9th St. Des Moines, IA 50309	—	Printing	\$ 1750.00	<input type="checkbox"/>
10/30/04	LMF-RPI 621 E. 9th St. Des Moines, IA 50309		Postage	1250.00	<input type="checkbox"/>
12/31/04	Linda L Meyer 2175 Pine Ave. Barnes, IA 50438	Self	Write off debt for 2003 miles (Sch. D)	4493.52	<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 \$ 7493.52
 TOTAL (if last page of this schedule) \$ 7493.52

*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.