

DISCLOSURE SUMMARY PAGE

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
MAY 19 2003
FILED

Black Hawk

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>13051</u>
Indexed	<u>pb</u>
Audited	_____
Computer	_____

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

IMPORTANT: Indicate type of committee you are reporting for:

(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

Robert J Brown (319) 266-5062
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

5/15/03
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 MAY 19 2003 REPORT FOR AN/A (1) ELECTION/(2) NON-ELECTION YEAR.
(report date) Indicate one

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
NOVEMBER 4, 2003
County & Local Committees, enter County in which Election is held
BLACK HAWK

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.)\$ 638.40

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 765.-

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.....\$ 1403.40

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 6173

Schedule F: Loan Repayments total (Attach Schedule F) 200.-

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)\$ 1141.67

UNPAID BILLS (From Schedule D - Attach Schedule D)\$ -0-

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ -0-

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

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)

CREWS FOR MAYOR COMMITTEE

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
1/20/03	ID# CK# 1250	JAMES OR CECELIA MIDD, SR 3949 BEAVER RIDGE TRAIL CEDAR FALLS IOWA 50613	NONE	\$ 250.-	
1/30/03	ID# CK# 2215	WALLACE D PARISH 311 E. 4 th ST WATERLOO, IOWA 50703	NONE	100.-	
1/30/03	ID# CK# 9676	ROBERT L ROSS + MARY E. ROSS 1004 HUDSON RD. CEDAR FALLS IOWA 50613	NONE	20.	
1/30/03	ID# CK# 5291	CREWS FOR MAYOR ROYCE L. WHITE 2303 GREENWOOD AVE CEDAR FALLS IOWA 50613	NONE	100.	
1/30/03	ID# CK# 6497	MARY HASKELL-HANSEN WILLIAM J. HANSEN 1105 RAINBOW DR - CEDAR FALLS IOWA 50613	NONE	50.	
1/30/03	ID# CK# 5046	CORY C. TOMLY AND WIFE 2020 WALNUT CEDAR FALLS IOWA 50613	NONE	50.-	
1/30/03	ID# CK# 12543	NANCY P. NEWELL + RICHARD S. NEWELL 1617 HACIENDA CT. CEDAR FALLS IOWA 50613	NONE	25.-	
2/11/03	ID# CK# 2551	DR. DARYL D. + SUE A SMITH 306 N. HIGHLAND DR CEDAR FALLS IOWA 50613	NONE	25.-	
4/16/03	ID# CK# 2697	MARVIN E. DIEMER 806 WESTWOOD DR CEDAR FALLS IOWA 50613-1746	NONE	100.-	
4/16/03	ID# CK# 6342	MRS. ORMS Richard W. Lynch 1309 CATHERINE ST CEDAR FALLS IOWA 50613-3537	NONE	25.-	

SUB-TOTAL

\$ 745.-

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

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)
Crews For Mayor Committee

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
2/4/03	ID# CK# 197	U.S. POST MASTER 221 W. 6 th ST CEDAR FALLS, IOWA 50613	STAMPS	\$ 37.-
2/10/03	ID# CK# 198	Black Hawk County Election 316 E. 5 th ST WATERLOO, IA 50703	ELECTION ROSTER FOR CEDAR FALLS	25.-
2/14/03	ID# CK# 199	JON T. CREWS 416 1/2 W 10 th CEDAR FALLS IOWA 50613	REPAYMENT OF LOAN	200.-
4/23/03	ID# CK# 195	Our check #195 was written to WALMART FOR \$7.58 but the bill was \$7.85. They asked the check was are all right.	27 WE ARE deducting .27 ^c from bills paid	(.27)
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 261.73

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).)

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

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

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ \$374.00

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 REPAID
2/14/03	JON T. CREWS 416 1/2 W. 10 th CEDAR FALLS, IOWA 50613	SAME	\$ 200.-

TOTAL CASH REPAYMENTS (PART II) \$ 200.-

From Schedule E -- TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 174.-

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