

FOR INSTRUCTIONS, SEE BACK OF FORM



DISCLOSURE SUMMARY PAGE

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

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

IMPORTANT: Indicate type of committee you are reporting for: 4

(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 JON T. CREWS Political Party _____
NOV 25 2003

Office Sought MAYOR District (if Senate or House) _____

Robert J. Brown
SIGNATURE OF TREASURER (or person filing this report)

(319) 266-5062
TELEPHONE

NOVEMBER 24, 2003
DATE SIGNED

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

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A DECEMBER 1, 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 _____

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.) \$ 353.85

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) 1644.98

Schedule F: Loans Received total (Attach Schedule F) 500.-

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

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 2498.83

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 2336.65

Schedule F: Loan Repayments total (Attach Schedule F) 150.-

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) \$ 12.18

**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) \$ 1,350.-

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES 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)
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
10/16/03	ID# CK# 15564	KEN BUDKE, D.O.S. 3217 CEDAR HEIGHTS DR CEDAR FALLS, IOWA 50613	NONE	\$ 100.-	
10/16/03	ID# CK# 2291		NONE	20.-	
10/16/03	ID# CK# 1509		NONE	20.-	
10/16/03	ID# CK# 6007	MR. OR MRS. SAUL DIAMOND 222 IRIS DR CEDAR FALLS, IOWA 50613	NONE	50.-	
10/17/03	ID# CK# CASH		NONE	20.-	
10/17/03	ID# CK# CASH		NONE	20.-	
10/17/03	ID# CK# CASH		NONE	20.-	
10/17/03	ID# CK# CASH		NONE	20.-	
10/17/03	ID# CK# 7605	DARINE OR CATHY O. BECK 504 N. HIGHLAND ST CEDAR FALLS, IOWA 50613	NONE	100.-	
10/17/03	ID# CK# 5464	JANE OR JOHN K. JONES 114 BRENTWOOD CEDAR FALLS, IOWA 50613	NONE	25.-	

SUB-TOTAL \$ 395.-
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)

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
10/18/03	ID# CK# 2209	ED HARKEN 3037 MINNETONKA DR CEDAR FALLS IOWA 50613	NONE	\$ 200.-	
10/20/03	ID# CK# 7087	ROBERT J. & JUDITH E. BROWN 4315 STERLING LANE CEDAR FALLS, IOWA 50613	NONE	100.-	
10/20/03	ID# CK# 1013	DONALD D. WOOD 3214 ABRAHAM DR CEDAR FALLS IA 50613	NONE	100.-	
10/21/03	ID# CK# 6216	BRUCE G. & HELEN ROGERS 2100 FOUR WINDS DR CEDAR FALLS IA 50613-1638	NONE	25.-	
10/22/03	ID# CK# 3581	JAMES E. BOLIN 3607 PANTHER LANE CEDAR FALLS, IOWA 50613	NONE	50.-	
10/23/03	ID# CK# 4341	GAYLEN D. & BARBARA J. WITZEL 1253 CLARK DR CEDAR FALLS IA 50613	NONE	25.-	
10/23/03	ID# CK# 1326	KAREN E. ATWOOD 1003 W. 4 TH ST WATERLOO, IOWA 50702	NONE	25.-	
10/24/03	ID# CK# 5562	GARY R. KELLEY 226 1/2 MAIN ST CEDAR FALLS, IOWA 50613	NONE	25.-	
10/27/03	ID# CK# 5252	J. NORGEN FISCHER 209 ROOSEVELT SUITE E CEDAR FALLS IOWA 50613	NONE	50.	
10/28/03	ID# CK# 1111	GARY L. KLODT 2026 MINNETONKA DR CEDAR FALLS, IOWA 50613	NONE	25.-	
SUB-TOTAL				\$ 625.-	
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

SCHEDULE A (Rev. 02/96)	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)

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
10/28/03	ID# CK# 651	William W. + Mary L. Farmer 1423 W. 5 th St Cedar Falls, Iowa 50613-2329	NONE	\$ 50.-
10/28/03	ID# CK# 7149	Audrey L. Smith E.D.D. 501 W 10th St Cedar Falls, Iowa 50613	NONE	35.-
10/28/03	ID# CK# 10048 Check		NONE	12.50
10/28/03	ID# CK# 10248		NONE	12.50
10/30/03	ID# CK# 6689	R. Allen or Pamela R. Hays 2709 Edgewood Dr Cedar Falls, Iowa 50613	NONE	100.-
11/1/03	ID# CK# 2688	Craig R. Berte 1404 Washington St Cedar Falls, IA 50613	NONE	45.-
11/1/03	ID# CK# 4708	Len or Gail E. Froyen 909 Lakeview Dr Cedar Falls, Iowa 50613	NONE	25.-
11/3/03	ID# CK# CASH	Otis Budlong 120 Iris Dr Cedar Falls, Iowa 50613	NONE	100.-
11/7/03	ID# CK# Cash		NONE	24.99
11/7/03	ID# CK# Cash		NONE	24.99
SUB-TOTAL				\$ 429.98
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

SCHEDULE A (Rev. 06/97)	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)

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
11/8/03	ID# CK# 2311	PETER G + Lynda L. Goulet 2718 Abraham Dr CEDAR FALLS IOWA 50613	NONE	\$ 25.-	
11/10/03	ID# CK# 4302	MARK E. MERSHON 1933 GRAND BLVD CEDAR FALLS, IOWA 50613-4555	NONE	50.-	
11/12/03	ID# CK# 2550	JOHN S + MARY A. CROSS 1940 MURNER AVE CEDAR FALLS, IOWA 50613	NONE	20.-	
11/17/03	ID# CK# 1532	Willis H. WAGNER 3104 Hudson Rd CEDAR FALLS, IOWA 50613	NONE	50.-	
11/17/03	ID# CK# 1590	ARTHUR L. + Shirley A. DAVIS 1403 CLAY ST CEDAR FALLS, IOWA 50613	NONE	50.-	
	ID# CK#				

SUB-TOTAL

\$ 195.-

TOTAL (if last page of this schedule)

\$ 1644.98

* 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

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.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
--------------------------------------	--------------------------

CHECK THIS BOX IF AMENDING FORM

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
10/21/03	ID# CK# 231	WOOLVERTON PRINTING P.O. BOX 456 CEDAR FALLS IOWA 50613	Double Post CARD MAILING	\$224.70
10/21/03	ID# CK# 232	CEDAR FALLS TIMES 311 W. BREMER WAUVERLE IA 50677	NEWS PAPER Ad (2)	340.-
10/24/03	ID# CK# 233	U.S. POST MASTER 221 W. 6 th ST CEDAR FALLS IA 50613	100 23¢ STAMPS	23.-
10/23/03	ID# CK# 234	WAL-MART COLLEGE SQUARE CEDAR FALLS IA 50613	THANK YOU NOTES	3.72
10/28/03	ID# CK# 235	WATERLOO COURIER 501 COMMERCIAL ST WATERLOO, IOWA 50701	2 Ads	1125.-
11/4/03	ID# CK# 236	WAL-MART COLLEGE SQUARE CEDAR FALLS, IA 50613	SNACK FOOD FOR ELECTION NIGHT	9.44
11/5/03	ID# CK# 237	Ad FAX P.O. Box 561 CEDAR FALLS, IA 50613	Ad CEDAR FALLS TIMES	422.-
11/5/03	ID# CK# 238	JON CREWS 416 W. 10 th CEDAR FALLS IOWA 50613	Reimbursed JON FOR RADIO Ads 96.1 STATION	160.-
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 2307.86

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)

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
<i>11/21/03</i>	ID# CK# <i>240</i>	<i>STAPLES 1500 FLAMMING DR WATERLOO, IOWA 50613</i>	<i>Cartridge</i>	<i>\$ 21.39</i>
<i>11/24/03</i>	ID# CK# <i>241</i>	<i>U.S. POSTMASTER 221 W. 6th ST CEDAR FALLS, IA 50613</i>	<i>Stamps</i>	<i>7.40</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 28.79</i>
TOTAL (if last page of this schedule)				<i>\$ 2336.65</i>

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 \$ 1,000.-

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.)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
10/19/03	JON CREWS 416 W. 10 TH ST CEDAR FALLS IA 50613	SAME	\$ 500.-

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT REPAID
11/21/03	JON CREWS 416 W. 10 TH ST CEDAR FALLS IA 50613	SAME	\$ 150.-

TOTAL (PART I) \$ _____

TOTAL CASH REPAYMENTS (PART II) \$ 150.-

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0.-

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,350.-

*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.