

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 Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name NOV 3 2005 Political Party NA
JOHN T. CREWS

Office Sought MAYOR OF CEDAR FALLS District (if Senate or House) _____

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

(319) 266-5062
TELEPHONE

NOVEMBER 1, 2005
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 NOVEMBER 3 2005 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
NOVEMBER 8 2005

County & Local Committees, enter County in which Election is held
CEDAR FALLS

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.)	\$	<u>37.18</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1725.-</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>-0-</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>-0-</u>
(Schedule H applies to Candidates' Committees Only)		
	SUB-TOTAL	\$ <u>1762.18</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)....		<u>336.81</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>-0-</u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>1425.37</u>

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>-0-</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>-0-</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>-0-</u>

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



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)
CRENS 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
2/22/05	ID# CK# 6156	JOSEF M. OR TRUPE K. VICH 1525 OLYMPIC DR WATERLOO IA 50701	NONE	\$ 100 -	<input type="checkbox"/>
2/22/05	ID# CK# 4561	MARK E. MERSON 1933 GRAND BLVD. CEDAR FALLS IOWA	NONE	25 -	<input type="checkbox"/>
2/23/05	ID# CK# 12347	WALT A & VEDN E. SORCHINA 940 OAK PARK BLVD CEDAR FALLS IOWA 50613	NONE	100 -	<input type="checkbox"/>
2/26/05	ID# CK# 6518	DAVID A OR SHARON K. WIELAND 4201 HERITAGE RD CEDAR FALLS IA 50613	NONE	200 -	<input type="checkbox"/>
2/26/05	ID# CK# 3915	DICK WITHAM 2033 LAPOSTOLLE RD WATERLOO IA 50702-4404	NONE	100 -	<input type="checkbox"/>
2/27/05	ID# CK# 5671	ROGER WHITE 2323 GREENWOOD AVE. CEDAR FALLS IA 50613	NONE	100 -	<input type="checkbox"/>
2/27/05	ID# CK# 2755	JAMES OR CECILIA MULLER, SR 3949 BEAVER RIDGE TRAIL CEDAR FALLS IA 50613	NONE	500 -	<input type="checkbox"/>
3/2/05	ID# CK# 9092	ROBERT L OR SUSAN M. RUNKLE WINDGATE UNIT #55 5300 SOUTH MAIN ST. CEDAR FALLS IA 50613	NONE	30 -	<input type="checkbox"/>
3/11/05	ID# CK# 2996	MARVIN DIEMER 5026 BLYDEBELL RD CEDAR FALLS, IOWA 50613-1746	NONE	100 -	<input type="checkbox"/>
3/14/05	ID# CK# 1804	WILLIS H. WAGNER 3104 HUDSON AVE CEDAR FALLS IA 50613. 6723	NONE	50 -	<input type="checkbox"/>
SUB-TOTAL				\$ 1305 -	
TOTAL (if last page of this schedule)				\$ 1305	

* 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

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 IO 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
3/23/05	ID# CK# 2752	DONALD W. OR JOANN J. SCHMITZ 1403 W. 4 th ST CEDAR FALLS, IA 50613-2005	NONE	\$ 200.-	
3/27/05	ID# CK# 1094	DONALD E. OR HELEN W. EDERANDERS 1123 W. 10 th ST. CEDAR FALLS, IOWA 50613	NONE	20.-	
4/8/05	ID# CK# 3041	DR DARYL D. SMITH + SUE A. SMITH 306 N HIGHLAND DR CEDAR FALLS, IOWA 50613	NONE	50.-	
4/18/05	ID# CK# 5852	SCOTT JORDAN PO BOX 1257 WATERLOO IA 50704	NONE	100.-	
6/20/05	ID# CK# 3651	JAMES E. BOLIN 3607 PANTHER LANE CEDAR FALLS IA 50613	NONE	50.-	
	ID# CK#				
SUB-TOTAL				\$ 420.-	
TOTAL (if last page of this schedule)				\$ 1,725.-	

* 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.

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE

B

MONETARY
EXPENDITURES

CREWS FOR MAYOR COMMITTEE

(Rev. 07/03)

CHECK THIS BOX IF
AMENDING FORM

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

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.

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
2/18/05	ID# CK# 244	U.S. POSTMASTER 221 W. 6 TH ST CEDAR FALLS, IA 50613	Purchased 50 stamps	\$ 18.50
2/24/05	ID# CK#	FIRST NATIONAL BANK 602 MAIN ST CEDAR FALLS, IA 50613	Checks	15.05
4/7/05	ID# CK# 245	WAL-MART CEDAR FALLS, IOWA 50613	THANK YOU NOTES + ENVELOPES	16.26
4/7/05	ID# CK# 246	U.S. POSTMASTER 300 SYCAMORE ST WATERLOO, IOWA 50703	100 stamps	37.-
5/16/05	ID# CK# 247	CEDAR BASIN JAZZ FESTIVAL Cedar Falls, IA 2710 COUNTRY MEADOW LANE	Advertising	100.-
5/16/05	ID# CK# 248	CEDAR FALLS COMMUNITY MAIN ST 117 MAIN ST CEDAR FALLS, IOWA 50613	Advertising	150.-
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 86.81 336.81
TOTAL (if last page of this schedule)				\$ 86.81 336.81

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).)