

FOR INSTRUCTIONS, SEE BACK OF FORM

### DISCLOSURE SUMMARY PAGE

Reset Form

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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
KEVIN LYNCH FOR 1ST WARD

**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: KEVIN LYNCH Political Party: DEMOCRAT  
 Office Sought: CITY COUNCIL District (if Senate or House): \_\_\_\_\_

Thomas R. Lynch  
SIGNATURE OF TREASURER (for person filing this report)

563 582 3963  
TELEPHONE

Nov 2, 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 2, 2005 REPORT FOR AN  (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  
Dubuque

### STATEMENT OF CASH ON HAND

<b>CASH ON HAND</b> at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount <b>MUST</b> 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>0</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)		<u>1,865<sup>00</sup></u>
Schedule F: Loans Received total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
<u>(Schedule H applies to Candidates' Committees Only)</u>		
<b>SUB-TOTAL</b>	\$	<u>1,865<sup>00</sup></u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>1,462<sup>86</sup></u>
Schedule F: Loan Repayments total (Attach Schedule F)		
<b>CASH ON HAND</b> at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>402.14</u>
<b>UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$	<u>0</u>
<b>IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$	<u>0</u>
<b>OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$	<u>0</u>
<b>CANDIDATE COMMITTEES ONLY:</b>		
CONSULTANT BREAKDOWN (Schedule G Attached?)		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0</u>

For Instructions, See Back of Form



SCHEDULE <b>A</b> (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)  
KEVIN LYNCH FOR 1ST WARD

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
8/5/05	ID# CK#	Paul Hammer 2375 SIMPSON DR	FRIEND	\$100	<input type="checkbox"/>
8/5/05	ID# CK#	TOM REILLY 951 OXFORD DR	FRIEND	100	<input type="checkbox"/>
8/5/05	ID# CK#	GARY OLSEN 2745 ANDREW CT DR	FRIEND	25	<input type="checkbox"/>
8/10/05	ID# CK#	WARREN WICK 1916 MARION DR	FRIEND	25	<input type="checkbox"/>
8/12/05	ID# CK#	PATTY LYNCH ARLINGTON VA	SISTER	150	<input type="checkbox"/>
8/16/05	ID# CK#	KIM TULLY 1320 MT PLEASANT DR IA	FRIEND	50	<input type="checkbox"/>
8/26/05	ID# CK#	SUSAN HENRICKS 3128 SHIRAS DR	FRIEND	50	<input type="checkbox"/>
9/7/05	ID# CK#	DAN KRUSE 600 CENTURY DR. DUBUQUE IA	FRIEND	100	<input type="checkbox"/>
9/7/05	ID# CK#	GARY GUETZKO 269 SOUTHGATE DR	FRIEND	25	<input type="checkbox"/>
9/9/05	ID# CK#	GARY GUETZKO 269 SOUTHGATE DR	FRIEND	25	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 700

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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SCHEDULE <b>A</b> (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)  
**KEVIN LYNCH FOR 1ST WARD**

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)	FAC 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
9/9/05	ID# CK#	VICKI BECHEN 575 ENGLISH LN DBQ	FRIEND	\$ 50	<input checked="" type="checkbox"/>
9/9/05	ID# CK#	STEWART SANDSTRM 2356 ANTLER RIDGE ASBURY IA	FRIEND	100	<input checked="" type="checkbox"/>
9/9/05	ID# CK#	MARY ANN GASEMAN 10690 RTE 52 S. DOB. IA	FRIEND	25	<input checked="" type="checkbox"/>
9/9/05	ID# CK#	TOM BARTON 13677 BARRINGTON CT DBQ	FRIEND	50	<input checked="" type="checkbox"/>
9/9/05	ID# CK#	RON GANSEN 2350 COATES DBQ	FRIEND	25	<input checked="" type="checkbox"/>
9/9/05	ID# CK#	DARYL STEILER 825 COUNCIL HILL DBQ IA	FRIEND	100	<input checked="" type="checkbox"/>
9/9/05	ID# CK#	JAN HENWOOD 9386 WAKASU LN DBQ	SISTER	50	<input checked="" type="checkbox"/>
9/9/05	ID# CK#	MIKE LOUGLESS 1965 EMBASSY WEST DBQ	FRIEND	25	<input checked="" type="checkbox"/>
9/29/05	ID# CK#	JUDY GIESEN 1600 WARI ST. DBQ	FRIEND	25	<input type="checkbox"/>
10/7/05	ID# CK#	BILL ROSS 1325 TOMAHAWK DBQ	SUPPORTER	15	<input type="checkbox"/>

SUB-TOTAL

\$ 465  
\$

TOTAL (if last page of this schedule)

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SCHEDULE <b>A</b> (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)  
**KEVIN LYNCH FOR 1ST WARD**

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(5), 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/YY)	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
10/7/05	ID# CK#	JIM SCHILLING 18421 BRITTANY CT. DBQ	FRIEND	\$ 50	<input type="checkbox"/>
10/26/05	ID# CK#	WARREN WICK 1910 MARION ST. DBQ	FRIEND	25	<input type="checkbox"/>
11/1/05	ID# CK#	BARRY BRONBERG 570 WOODLAND RD DBQ	FRIEND	100	<input type="checkbox"/>
11/2/05	ID# CK#	JAN HEATWOOD 9386 WAKASU LN. DBQ	SISTER	200	<input type="checkbox"/>
11/2/05	ID# CK#	PATTY LYNCH ARLINGTON VA.	SISTER	200	<input type="checkbox"/>
9/8/05	ID# CK#	JAN. POWERS 815 THORNWOOD DR. DBQ	FRIEND	75	<input type="checkbox"/>
9/9/05	ID# CK#	GARY OLSEN 2745 ANDREW CT. DBQ	FRIEND	50	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL \$ 700  
TOTAL (if last page of this schedule) \$ 1865

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE B</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)  
**KEVIN LYNCH FOR 1ST WARD**

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
8/12/05	ID# CK# 501	DUBUQUE COUNTY AUDITOR	VOTER LIST	\$ 30.00
8/28/05	ID# CK# 502	STAPLES	INVITATIONS ENVELOPES	26.82
8/20/05	ID# CK# 503	HY-VEE	STAMPS	29.66
9/29/05	ID# CK# 504	COPYWORKS	BROCHURES	374.50
10/7/05	ID# CK# 505	SIGNWORKS	YARD SIGNS	632.37
11/1/05	ID# CK# 506	MAIL SERVICES UNLIMITED	BROCHURE MAILING	856.00
8/16/05	ID# CK#	EAST DOB. SAVINGS	CHECKS	19.50
	ID# CK#			

SUB-TOTAL **\$1462.82**  
 TOTAL (if last page of this schedule) **\$1462.82**

**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.6(3)(I).)