

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Brandon Ross for City Council

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

<b>FORM</b> <b>DR-2</b> (Rev. 07/2007)	<b>DISCLOSURE</b> <b>REPORT</b>
<b>For Office Use Only</b>	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

**CANDIDATE COMMITTEES ONLY:**

Candidate Name Brandon Ross Political Party (if applicable) NA

Office Sought SDWA CITY CITY COUNCIL District (if Senate or House) \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Holly Davis Hart 319-337-7341 9-29-2007  
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A December 1, 2003 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by #  1

CHECK IF AMENDMENT TO REPORT DATED 12/1/2003

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**

<b>CASH ON HAND</b> at the beginning of the reporting period. (Total of all funds 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>943.29</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) .....		<u>574.10</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>1517.39</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....		<u>87.58</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) .....	\$	<u>1,429.81</u>
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D).....	\$	_____
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	\$	<u>60</u>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F).....	\$	_____
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)		___ YES ___ NO
<b>CANDIDATE COMMITTEES ONLY:</b>		
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$	_____
<b>STATE COMMITTEES:</b> Submit a reconciled campaign account bank statement in January of each year.		

For Instructions, See Back of Form



SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input checked="" 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)

*Brandon Ross for City Council*

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), 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
10/30/03	ID# CK#	<i>misc. cash</i>		\$ <i>204</i>	<input checked="" type="checkbox"/>
10/30/03	ID# CK#	<i>William + Florence Boos 1427 E. Davenport St Iowa City, IA 52245</i>	<i>none</i>	<i>40</i>	<input type="checkbox"/>
10/27/03	ID# CK#	<i>Michael Santangelo 1013 E. College St Iowa City, IA 52245</i>	<i>none</i>	<i>50</i>	<input type="checkbox"/>
10/27/03	ID# CK#	<i>Ethel Carlin 210 Richards St Iowa City, IA 52246-3578</i>	<i>none</i>	<i>100</i>	<input type="checkbox"/>
10/25/03	ID# CK#	<i>Randy Boynton 1570 Mulcahine Ave Iowa City, IA 52240</i>	<i>none</i>	<i>50</i>	<input type="checkbox"/>
10/25/03	ID# CK#	<i>Derek Mauer + Linda Nelson 1405 Oakland Ave Iowa City, IA 52245</i>	<i>none</i>	<i>50</i>	<input type="checkbox"/>
11/2/03	ID# CK#	<i>Hills Bank + Trust Co. 132 E. Washington St Iowa City, IA 52240</i>	<i>none</i>	<i>.03</i>	<input type="checkbox"/>
11/30/03	ID# CK#	<i>Hills Bank + Trust Co. "</i>	<i>none</i>	<i>.05</i>	<input type="checkbox"/>
10/25/03	ID# CK#	<i>Charles + Carole DePrasie 2281 Wagon Avenue, SE Lone Tree, IA 52255-9785</i>	<i>none</i>	<i>15</i>	<input type="checkbox"/>
10/25/03	ID# CK#	<i>Jeffrey Porter + Claire Spunster 413 N. Gilbert St Iowa City, IA 52245</i>	<i>none</i>	<i>30</i>	<input type="checkbox"/>
SUB-TOTAL				\$ <i>539.08</i>	
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

Resort form

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

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input checked="" 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)  
*Brandon Ross for City Council*

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>11/4/03</i>	ID# CK# <i>1017</i>	<i>Red Avocado 521 E. Washington St Iowa City, IA 52240</i>	<i>post-election buffet for volunteers</i>	<i>\$ 70</i>
<i>11/4/03</i>	ID# CK# <i>1018</i>	<i>Red Avocado " "</i>	<i>"</i>	<i>15</i>
<i>10/3/03</i>	ID# CK# <i>24</i>	<i>Hill Bank &amp; Trust Co. 132 E. Washington St. Iowa City, IA 52240</i>	<i>service charge on campaign checking account</i>	<i>2.10</i>
<i>10/3/03</i>	ID# CK#	<i>error</i>		<i>.48 <del>10</del></i>
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				<i>\$ 87.58</i>
TOTAL (if last page of this schedule)				<i>\$ 87.58</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 68A.402(3)(i).)

**Schedule E: In Kind Contributions**

**Sch-E**

Committee Name <b>Brandon Ross for City Council</b>		Committee ID in 13367		Filing Date	12/1/2003
Committee Type <b>Municipal Candidate - City Council</b>		Status <b>Filed</b>		Adjusted Due Date	
				Filed Date	11/30/2003
				Amended Date	
				Received Date	
Date Recieved	Name and Address of Contributor	Relationship to Candidate *(if applicable)	Description of In Kind Contribution	Estimated Fair Market Value	"X" for Fund-Raiser
10/30/2003	Burt, David  217 South Johnson Street Apt. #4 Iowa City, IA 52240	None	Gifts or Meals for Volunteers  meals for campaign volunteers	\$60.00	
<b>Total Estimated Fair Market Value</b>				<b>\$60.00</b>	