

Reset Form

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	
Logged In	
Scanned	
Computer	
Audited	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS COMMITTEE

IMPORTANT: Indicate by # type of committee you are reporting for: 5
 (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

CANDIDATE COMMITTEES ONLY:

Candidate Name: TERRENCE NEUZIL Political Party (if applicable): DEMOCRAT

Office Sought: COUNTY SUPERVISOR District (if Senate or House): PM 1-11-07

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Terrence A. Neuzil 319-338-3482 JAN. 11, 2007
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A JAN. 19 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
 (report date) Indicate by # 2

- 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 DR-3 is filed.)

Local Committees, enter Date of Election
JUNE / NOV. 2008
 County & Local Committees, enter County in which Election is held
JOHNSON

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds 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>502.68</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>3966.00</u>
Schedule F: Loans Received total (Attach Schedule F)	<u>—</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	<u>—</u>
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL	\$ <u>4468.68</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	<u>1797.84</u>
Schedule F: Loan Repayments total (Attach Schedule F)	<u>500.00</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ <u>2170.84</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ <u>—</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ <u>150</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ <u>—</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
CANDIDATE COMMITTEES ONLY:	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ <u>—</u>

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

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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)
NEUZZL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS 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.

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
02/13/06	ID# CK#	DAVID SCHOLZ 4248 TURKEY CREEK RD. NE IOWA CITY, IA 52240		\$ 50	<input checked="" type="checkbox"/>
02/15/06	ID# CK#	MARY JANE GRINGER 3536 HWY 1 SW IOWA CITY, IA 52240		100	<input checked="" type="checkbox"/>
02/16/06	ID# CK#	WILLIS BYWATER 621 S. SUMMIT ST. IOWA CITY, IA 52240		50	<input checked="" type="checkbox"/>
02/16/06	ID# CK#	JERRY STEFFENSMEIER 4262 RED MAPLE TRAIL NE IOWA CITY, IA 52240		50	<input checked="" type="checkbox"/>
02/16/06	ID# CK#	RUTH WISSINK 22 OAK PARK DR. NE IOWA CITY, IA 52240		50	<input checked="" type="checkbox"/>
02/17/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING LETTER DEPOSIT MADE ON 02/17/06		690	<input checked="" type="checkbox"/>
02/19/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING LETTER DEPOSIT MADE ON 02/19/06		170	<input checked="" type="checkbox"/>
02/22/06	ID# CK#	JOHN HAYEK 531 KIMBALL RD. IOWA CITY, IA 52245		100	<input checked="" type="checkbox"/>
02/23/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING LETTER DEPOSIT MADE ON 02/23/06		250	<input checked="" type="checkbox"/>
02/24/06	ID# CK#	SONYA LARSEN 309 WOODRIDGE AVE. IOWA CITY, IA 52245		30	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1540	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS COMMITTEE

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02/25/06	ID# CK#	MARVIN NEUZIL 2923 SWEET BRIAR AVE. IOWA CITY, IA 52245	FIRST COUSIN	\$ 30	<input checked="" type="checkbox"/>
02/27/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING LETTER DEPOSIT MADE ON 02/27/06		235	<input checked="" type="checkbox"/>
03/04/06	ID# CK#	ELIDA LEMLEY P.O. BOX 107 LONE TREE, IA 52755		100	<input checked="" type="checkbox"/>
03/05/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING LETTER DEPOSIT MADE ON 03/06/06		395	<input checked="" type="checkbox"/>
03/05/06	ID# CK#	JIM GLASGOW 3274 DUBUQUEST ST. NE IOWA CITY, IA 52240		200	<input checked="" type="checkbox"/>
03/05/06	ID# CK#	PHYLLIS BLANK 215 COLLEGE CT. IOWA CITY, IA 52245		30	<input checked="" type="checkbox"/>
03/05/06	ID# CK#	PAMELA KRAL 3206 RAVEN CT. IOWA CITY, IA 52245		30	<input checked="" type="checkbox"/>
03/05/06	ID# CK#	JUDY CRYER 506 LARCH LN. IOWA CITY, IA 52245	MOTHER- IN-LAW	50	<input checked="" type="checkbox"/>
03/05/06	ID# CK#	MAXINE BULECHEK 5090 340 TH ST. NE IOWA CITY, IA 52240		50	<input checked="" type="checkbox"/>
03/05/06	ID# CK#	JAN TSCHANTZ 16 OAK PARK PL. NE IOWA CITY, IA 52240		50	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1170	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS COMMITTEE

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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.

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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
03/11/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING EVENT DEPOSIT MADE ON 03/11/06		\$ 671	<input checked="" type="checkbox"/>
03/06/06	ID# CK#	RALPH NEUZIL 2520 MAYFIELD RD. IOWA CITY, IA 52245	FATHER	100	<input checked="" type="checkbox"/>
03/13/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING LETTER DEPOSIT MADE ON 03/13/06		235	<input checked="" type="checkbox"/>
03/22/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING LETTER DEPOSIT MADE ON 03/22/06		40	<input checked="" type="checkbox"/>
04/02/06	ID# CK#	JIM HAYES 1142 E. COURT ST. IOWA CITY, IA 52240		100	<input checked="" type="checkbox"/>
04/03/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING LETTER DEPOSIT MADE ON 04/03/06		20	<input checked="" type="checkbox"/>
04/19/06	ID# CK#	LORIE LEO 3510 CUMBERLAND RIDGE RD. NE NORTH LIBERTY, IA 52317		50	<input checked="" type="checkbox"/>
04/24/06	ID# CK#	UNITEMIZED CONTRIBUTIONS OF \$25 OR LESS FOR FUNDRAISING LETTER DEPOSIT MADE ON 04/24/06		40	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL
 \$ 1256
 TOTAL (if last page of this schedule)
 \$ 3966

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FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS COMMITTEE

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
02/18/06	ID# CK#	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245	REIMBURSEMENT FOR CAMPAIGN PENCILS ~ UNPAID BILL FROM SCHEDULE "D" 2005. (CHECK # 1156)	\$ 37.90
02/19/06	ID# CK#	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245	REIMBURSEMENT FOR POSTAGE (CHECK # 1157)	632.55
02/19/06	ID# CK#	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245	REIMBURSEMENT FOR COPYING AND CUTTING OF CAMPAIGN LIT., ENVELOPES, PRINTER INK (CHECK # 1158)	296.36
03/08/06	ID# CK#	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245	REIMBURSEMENT FOR POSTAGE (CHECK # 1159)	35.80
03/08/06	ID# CK#	SUSAN HARMAN 2610 FRIENDSHIP ST. IOWA CITY, IA 52245	REIMBURSEMENT FOR BIRTHDAY CAKE AT FUNDRAISER (CHECK # 1160)	17.99
03/08/06	ID# CK#	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245	REIMBURSEMENT FOR FOOD, DRINKS, UTENSILS, CUPS, BOWLS, PLATES, FOR FUNDRAISER AND VOLUNTEERS (CHECK # 1161)	219.24
03/10/06	ID# CK#	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245	CAMPAIGN LOAN REPAYMENT (CHECK # 1162)	SEE SCHEDULE "F"
07/17/06	ID# CK#	KCTJ RADIO P.O. BOX 2118 IOWA CITY, IA 52244	LEAP FROG GRAPHICS GIFT CERTIFICATE FOR CAMPAIGN CAR MAGNETS (CHECK # 1163)	60.00
SUB-TOTAL				\$ 1299.84
TOTAL (if last page of this schedule)				\$

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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)
NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS 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
07/18/06	ID# CK#	KCJJ RADIO P.O. Box 2118 IOWA CITY, IA 52244	RAGE GRAFIX SIGNS AND SCREEN-PRINTING GIFT CERTIFICATE FOR CAMPAIGN STICKERS (CHECK # 1164)	\$ 200.00
12/11/06	ID# CK#	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245	REIMBURSEMENT FOR FOOD FOR VOLUNTEERS, PRINTER INK AND POSTAGE (CHECK # 1165)	155.20
12/11/06	ID# CK#	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245	REIMBURSEMENT FOR WEB HOSTING AND DOMAIN NAME FOR CAMPAIGN WEB-PAGE (CHECK # 1166)	142.80
	ID# CK#			
SUB-TOTAL				\$ 498.00
TOTAL (if last page of this schedule)				\$ 1797.84

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).)

FOR INSTRUCTIONS. SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS COMMITTEE

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SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
03/05/06	RALPH NEUZIL 2520 MAYFIELD RD. IOWA CITY, IA 52245	FATHER	CHICKEN AND DUMPLING SOUP	\$ 75	<input checked="" type="checkbox"/>
03/05/06	DON HORA 3907 W. OVERLOOK RD. IOWA CITY, IA 52240		CHILI	75	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 150
 TOTAL (if last page of this schedule) \$ 150

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.

Reset Form

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
NEUZIL FOR THE JOHNSON COUNTY BOARD OF SUPERVISORS COMMITTEE

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 500.00

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.)

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
			\$

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
03/10/06	TERRENCE NEUZIL 3201 FRIENDSHIP ST. IOWA CITY, IA 52245 (CHECK # 1162)	CANDIDATE	\$ 500.00

TOTAL (PART I) \$ —

TOTAL CASH REPAYMENTS (PART II) \$ 500.00

From Schedule E -- TOTAL LOANS FORGIVEN \$ —

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0.00

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