DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 05/2002) DISCLOSURE REPORT

For Office Use Only
Comm. # ____
Indexed ____
Audited ____
Computer ____

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Don Thomas For Streets

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: OCT 30 2003

Candidate Name: Don Thomas
Political Party: ____
Office Sought: Cedar Rapids Streets Commissioner
District (if Senate or House): ____

Verne A. Wilkinson — SIGNATURE OF TREASURER (or person filing this report)
319-368-1180 — TELEPHONE
10-30-2003 — DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from $20 to $800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 10-30-2003 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: 11-4-2003
County & Local Committees, enter County in which Election is held: Linn

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.) ..... $ 6293.48

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 8752.00

Schedule F: Loans Received total (Attach Schedule F) ..... ____

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... ____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... $ 15,045.48

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) .. 7689.29

Schedule F: Loan Repayments total (Attach Schedule F) ..... ____

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... $ 7356.19

**UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $ ____

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $ ____

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $ ____

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ____ YES ____ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ ____

For Instructions, See Back of Form

SCHEDULE **A** (Rev. 06/97)	MONETARY RECEIPTS
☐ 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)*
Don Thomas For Street

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
7/21	ID# CK#	Boyl Weekly 4266 Coxmeadow Dr SE CR IA 52403		$ 25.00	
"	ID# CK#	Steven or Ann Knierim 2241 Linden Dr. SE CR IA 52403		25.00	
"	ID# CK#	Robert Arnold 250 Lincoln Heights Dr SE CR. IA 52403		25	
"	ID# CK#	Frank N. Magid 2184 Linden Dr SE CR IA 52403		200	
"	ID# CK#	William Olinger 1120 - 2nd. Ave SE CR IA 52403		250	
"	ID# CK#	Richard J. Felter 2626 Indian Hill Rd SE CR IA 52403		100.00	
7/20/03	ID# CK#	Wm. or Julianne Taylor 2618 Diamondwood Dr. CR IA 52403		250.00	
7/23/03	ID# CK#	John H. Wollner 4 Sylvan LN. SE CR IA 52403		100.00	
7/23/03	ID# CK#	Dr. or mrs. R.L. Hill 541 Augusta Dr SE CR IA 52403		25.00	
7/23/03	ID# CK#	W. Bruce Johnson Diane H. Ramsey 514 Fairview Dr. SE		100.00	
			SUB-TOTAL	$ 1100	
			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

☐ 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)*
Don Thomas For Streets

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
7/23/03	ID# CK#	Dan or Norma Kay Mineck 8801 Deer Crest Dr. NE CR Ia 52411		$ 100 —	
	ID# CK#	Marcus or Catherine Gullickson 3604 Honey Hill Dr. SE CR Ia 52403		30 00	
	ID# CK#	Gary D. Speicher 2857 Mt. Vernon Rd SE CR Ia 52403		25 00	
	ID# CK#	Dr. David or Carol Wolf 2139 Lincolnshire Dr. SE CR Ia 52403		50 00	
	ID# CK#	David or Chris Kubicek 2564 Swan Lk. Rd NW North Liberty, Ia 52317-9547		100 00	
	ID# CK#	Tom or Jeanne Amosson 4210 Pioneer Trail SE CR Ia 52403		50 —	
	ID# CK#	Ron Landergott 4403 First Ave SE CR Ia 52403		25 —	
	ID# CK#	Robert or Mary Rathjé 2640 Victoria St Marion, Ia 52302		100 00	
	ID# CK#	Eliot or Barbara Protsch 2612 Diamondwood Dr. CR Ia 52403 1/8		50 00	
7/23/03	ID# CK#	Kyle or Susan Skogman 4757 Hickory Wind Ln Marion, Ia 52302-9640		100 00	
			SUB-TOTAL	$630	
			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

☐ 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)*
Don Thomas For Street

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
7/28	ID# CK#	Wm & Rosemary Hochstetler 1346 Elmhurst Dr NE CR IA 52402		$ 100.00	
	ID# CK#	Gary or Susan Streit 3211 Cottage Grove AVE SE CR IA 52403		100.00	
	ID# CK#	Thomas or [illegible] Reasoner 2483 Grande AVE SE CR IA 52403-2817		100.00	
7/28	ID# CK#	Richard Garberson 10 Sylvan LN. SE CR IA 52403		100.00	
	ID# CK#	Kevin Collins 385 Salem Ridge Rd Marion, IA 52302		100	
	ID# CK#	Doug or Suzanne Oelschlaeger 2209 Blake Blvd SE CR IA 52403		100.00	
	ID# CK#	Glenn or Barbara Johnson 306 Rockvalley LN. NW CR IA 52405		100.00	
	ID# CK#	Michael or Susan McDermott 2012 Blake Blvd. SE CR IA 52403		100.00	
	ID# CK#	Gilda Boyer 7100 Greenbranch LN CR IA 52411		25.00	
	ID# CK#	Drew Skogman 3641 Cottage Grove AVE SE CR IA 52403		100.00	

SUB-TOTAL $ 925.00

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
☐ 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)*
Don Thomas

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
7/28/03	ID# CK#	Clark & Nancy Parks PO Box 951 CR IA 52406-0951		$ 50.00	
	ID# CK#	Dennis Shaheen 1130 Crestview Dr. SE CR IA 52403		25.00	
	ID# CK#	Joe Phernetton 3425 Sue Ln. NW CR IA 52405		25.00	
	ID# CK#	James H. Schiltz, Sr. 2722 Virginia Dr. SE CR IA 52403		25.00	
	ID# CK#	James or Anne Fitzpatrick 20 Fitzpatrick Ct. NW CR IA 52405		100.00	
	ID# CK#	Richard or Greer Fry 2151 Blake Blvd. SE CR IA 52403-2823		50.00	
	ID# CK#	Diane Kutzko 2026 - 5th Ave SE CR IA 52403-2713		50.00	
	ID# CK#	Wesley or Lisa Hussinger 601 Sisley Grove Rd NW CR IA 52405-9009		50.00	
	ID# CK#	Connie M. ALT 519 Forest Dr. SE CR IA 52403		50.00	
	ID# CK#	Dale or Nancy Penner 4401 Deerview Rd NE CR IA 52402		50.00	

SUB-TOTAL $ 475

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

☐ 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)*

Don Thomas For Streets

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
7/28/03	ID# CK#	David or Mary Johnson 3600 Northwood Dr. NE CR IA 52402-2731		$ 50.00	
7/28/03	ID# CK#	John Bickel 2305 Hillcrest Dr. SE CR IA 52403		50.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 100

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

☐ 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)*

Don Thomas For streets

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
8-6-03	ID# CK#	R.L or B.K Flint 3812 Antelope Trail NE C R IA 52402		$ 25 —	
8-6-03	ID# CK#	mr. or mrs. David Unzeitig 308 Andover LN. SE C R IA 52403		75 —	
"	ID# CK#	Allan or Jayne Peremsky 4300 Fox Meadow Dr SE C R IA 52403		100 —	
"	ID# CK#	Charles M. Murphy 717 East Post CT. SE C.R IA 52403		50 00	
"	ID# CK#	Richard or Marla Nelson 3645 Bever AVE SE C.R. IA 52403		25 00	
"	ID# CK#	Keith or Rose Marie Fletcher 4290 Cottage Grove PKWY SE C R IA 52403		50 00	
	ID# CK#	Dow Prouty 2515 Amber Dr. NE C R IA 52402		2 00	
	ID# CK#	Paul or Karen Rhines 2300 Hillcrest Dr. SE C.R IA 52403		200 —	
	ID# CK#	GF or mc Kanz 2208 Bever AVE SE C.R IA 52403		125 00	
8-6-03	ID# CK#	Michael or Marlene Cambridge 3410 Sue LN. NW C.R. IA 52405		175 00	

SUB-TOTAL $827

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

☐ CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Don Thomas For Streets

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
8/6/03	ID# CK#	Robert W. or Alice Glotfelty 3865 Belden CT. NE C R Ia 52402		$ 25.00	
	ID# CK#	Craig A. Anderson 1716-2nd. Ave SE C R Ia 52403		25.00	
	ID# CK#	Susan or Daryl Spivey 2107 Sandalwood Dr. NE C R Ia 52402		50.00	
	ID# CK#	Richard or m Joan Nazette 100 Thompson Dr. SE C Ia 52403		50.—	
	ID# CK#	Thomas A. Parks 177 Ryecroft SE Cedar Rapids, Ia 52403		25.—	
	ID# CK#	Dr. William & mrs. DeKock 2404 Grande Ave SE C R Ia 52403		50.—	
8/6/03	ID# CK#	Gerald L. Ovel 2058 Foxbourne Dr. SE C R Ia 52403		100.—	
8/6/03	ID# CK#	Steven R. Heyer 6826 Bowman LN. NE C R Ia 52402		100.—	
8/14/03	ID# CK#	JEFF or Teresa K. Elgin 6940 - Bowman LN. NE C.R. Ia. 52402		100.00	
	ID# CK#				

SUB-TOTAL $ 525

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

☐ 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)
Don Thomas For Streets

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
8/15/03	ID# CK#	Tony & Mrs. Huebsch 4248 Sunland Ct. SE C.R. Ia 52403		$ 30.00	
"	ID# CK#	Rex Eno 365 Abbotsford Rd SE C.R. Ia 52403		50.00	
	ID# CK#	Ronald or JoAnn Dunmire 358 Eastland Dr. SE C.R. Ia 52403		50.00	
8/15/03	ID# CK#	Albert Gravelle 100-1st Street SW Cedar Rapids, Ia 52404		50.00	
8/15/03	ID# CK#	Monomad Ingram 360 Parkland Dr. SE C.R. Ia 52403		100.00	
	ID# CK#	Thomas L. Alter 1089 Cedarwoods Rd C.R. Ia 52403		150.00	
8/15/03	ID# CK# Cash	Ken Erger 129-31st Street SW C.R. Ia 52404		25.00	
8/21/03	ID# CK#	JOE & Patty Lee 940-44th St. SE C.R. Ia 52403		50.00	
"	ID# CK#	Frank or Cheryle Mitvalsky 352 Park Terrace SE C.R. Ia 52403		50.00	
8/21/03	ID# CK#	Don or Karen Pfeiler 3221 Parkview Ct. SE C.R. Ia 52403		50.00	
			SUB-TOTAL	$ 1605.00	
			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

☐ 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)
Don Thomas For Streets

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
8/21/03	ID# CK#	Jack, Alan or Susan Zazza 161 Kyrie SE Cedar Rapids, IA 52403		$ 25.00	
9/12/03	ID# CK# Cash	Herb Isenberg 2249 Washington Ave SE Cedar Rapids, IA		100.00	
9/12/03	ID# CK#	Wm. Shuttleworth 2403 Indian Hill Rd. SE C.R. IA 52403		100.00	
"	ID# CK#	John or Alice Wasson 3315 Silverthorne Rd NE CR IA 52402		50.00	
"	ID# CK#	Jon or Kathleen Bogert 2700 Highland Cir Marion, IA 52302		200.00	
	ID# CK#	Waldo or Charlotte Morris 4512 Lakeside Rd Marion, IA 52302		200.00	
	ID# CK#	Abraham or Susan Oglanian		25.00	
9/12/03	ID# CK#	Jack or Nancy Evans 2336 Linden Dr. SE Cedar Rapids IA 52403		50.00	
10/13/03	ID# CK# Cash	Walter L. McNamara 4403 - 1st Ave. SE #208 Ex. Plaza Blvd.		100.00	
	ID# CK#				

SUB-TOTAL $ 850

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

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)

☐ CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Don Thomas For Streets

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
9/24/03	ID# CK#	Gerald or Barbara Eganhouse 295-30th ST. SE C R Ia 52403		$ 100.00	
9/24/03	ID# CK#	H. Frank Bellon, Jr 3613 Caribou CT. NE C R Ia 52402-2568		50.00	
9/24	ID# CK#	Guy or Terri Wendler 3580 Cottage Grove AVE SE C R Ia 52403-1651		100.00	
9/24	ID# CK#	Robert F. Kazimour PO Box 2207 C. R. Ia. 52406-2207		100.00	
9/24	ID# CK#	Anace or Polly Aossey 1745 Applewood PL NE C R Ia 52402-3321		100.00	
9/30	ID# CK#	Ronald L. Kelley Suite 260 2750 1ST. AVE NE C R Ia 52402		500.00	
9/30	ID# CK#	Wm. or Marnie Fletcher 657 Valley Brook Dr. SE C. R Ia 52403		200.00	
10/8	ID# CK#	David W. Lodge JO Anne Lodge 225 Rock Ridge R. NW CR		50.00	
10/8	ID# CK#	Herbert or Irene Eckert 3224 Beaver AVE. SE C R Ia 52403		40.00	
10/8	ID# CK#	James or Julie Sattler 4359 Pioneer Trl. SE C. R. Ia. 52403		200.00	

SUB-TOTAL $ 1440

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

☐ CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Don Thomas For Streets

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
10/21/03	ID# CK#	Scott Olson 6467 Quail Ridge Dr. SW Cedar Rapids, Ia 52404		$ 100.00	
10/21/03	ID# CK#	James Chipokas 305-2nd. St. SE STE. 506 Cedar Rapids, Ia 52401		200.00	
10/21/03	ID# CK#	Johathan T. Dusek Dina Igram Dusek 4293 Fox Meadow Dr. SE Cedar Rapids, Ia 52403		150.00	
10/27/03	ID# CK#	Allen Weaver, Jr. 411-First Ave. SE Cedar Rapids, Ia 52403		200.00 Cash	
10/28/03	ID# CK#	Harold Miller 216-31st. St. NW Cedar Rapids Ia		25.00	
10/28/03	ID# CK#	Thomas or Clara Kleiman PO Box 8266 Cedar Rapids, Ia 52408		100.00	
10/28/03	ID# CK#	Wm. or Mary Kathryn Bogert 230 Teakwood Ln. NE Cedar Rapids, Ia 52402		200.00	
10/28/03	ID# CK#	Frank or Marilyn Magid 2184 Linden Drive SE Cedar Rapids, Ia. 52403		200.00	
10/28/03	ID# CK#	Mike and Gerri Ament 5345 E. McLellan Rd. Unit 104 Mesa, Az. 85205		100.00	
	ID# CK#				

SUB-TOTAL $1275

TOTAL *(if last page of this schedule)* $8752

* 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 B (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Don Thomas For Streets

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
10/9/03	ID# CK#	Linn County Auditor Cedar Rapids, IA	VOTER LIST	$ 41.13
10/14/03	ID# CK#	Cedar Rapids KGAN	Advertisement	1245.00
10/14	ID# CK#	On media 6300 Council ST Cedar Rapids	Advertisement	2603.28
	ID# CK#	Speed Print 1127-3rd St. SE Cedar Rapids, IA	Advertisement POSTAGE COST	2799.88
10/13	ID# CK#	KMRY 1957 Blairs Ferry Rd Cedar Rapids, IA	Advertisement	1000.00
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL $7689.29

TOTAL *(If last page of this schedule)* $7689.29

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 Schedule B)