

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

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

Wes Wins FOR City Council

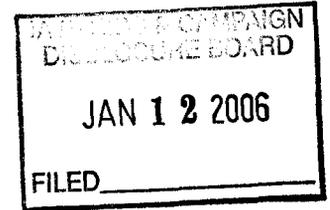
IMPORTANT: Indicate by # type of committee you are reporting for: 6

(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 Wes Wins Political Party (if applicable) _____

Office Sought OSKAROSS 3RD WARD COUNCIL District (if Senate or House) _____



Late reports are subject to possible civil and criminal penalties.

[Signature] TELEPHONE (641) 673-4540 DATE SIGNED 1-10-06

SIGNATURE OF PERSON FILING REPORT

I AM FILING A 10 ON OSKAROSS ELECTION THROUGH DECEMBER 31, 2005 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date) Indicate by #

- 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
NOVEMBER 8, 2005

County & Local Committees, enter County in which Election is held _____

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>144.52</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>386.92</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0.00</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
	SUB-TOTAL..... \$	<u>531.44</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>238.73</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0.00</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>292.71</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>708.84</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>285.55</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0.00</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <u>NA</u> NO	
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>NA</u>

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)
Wes Wius 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.

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
10/3	ID# CK#	Lila TURNBULL 1261 185th St. Pella, IA. 50219		\$ 25.-	<input type="checkbox"/>
11/4	ID# CK#	Ron PADGETT 1815 Do. 3rd OSKALOOSA, IA. 52577		60.-	<input type="checkbox"/>
11/9	ID# CK#	Unitemized		57.25	<input type="checkbox"/>
11/10	ID# CK#	GEORGE L. OR BARBARA H. LIND 241 TERRACE DR. OSKALOOSA, IA. 52577		25.-	<input type="checkbox"/>
12/4	ID# CK#	Jon & Jane OXBERGER 1396 Hwy 163 LEIGHTON, IA. 50143		119.67	<input type="checkbox"/>
12/24	ID# CK#	BENICE HAIN PATTERSON 512 South H. St. OSKALOOSA, IA. 52577		100.-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

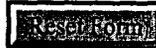
\$ 386.92

TOTAL (if last page of this schedule)

\$ 386.92

* 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



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)
WES Wills 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
11/2	ID# CK# 1002	1102 So. 7th Street Share Iowa Building OSKALOOSA, IA. 52577	sent for soup supper (Meeting)	\$ 50.00
11/5	ID# CK# 1003	311 3rd AVE. WEST 4 OSKALOOSA, IA. 52577 Greeny Stores	Food for soup Supper (Meeting)	94.83
11/10	ID# CK# 1004	OSKALOOSA Herald 1901 A. AVE. WEST OSKALOOSA, IA. 52577	Thank you in Local Paper	38.90
11/11	ID# CK# 1005	WES' Family CARE 914 A. AVE. WEST OSKALOOSA, IA. 52577	Neighborhood Soup Supper WES' Family CARE - Share Iowa FOOD - Celebrations	50.00
11/14	ID# 1 CK# 1007	Dennis Palmer 244 Terrace Dr. OSKALOOSA, IA. 52577	Computer Paper	5.00
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ ~~238.73~~ 238.73

TOTAL (if last page of this schedule) \$ ~~238.73~~ 238.73

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 D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Wes Wins For City Council

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
 (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/19/05	OTTAWA PRINTING 105 S. BIRCH OTTAWA IA 52501	YARD SIGNS	\$ 372.10
10/17 + 10/27/05	PRECISE IMAGING 717 HIGH AVE WOOD OSKALOUSA IA 52577	CAMPAIGN FLYERS	336.74
SUB-TOTAL			\$ 708.84
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 708.84

*If actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:
 *Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Wes Wiles for City Council

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
10/27	Dennis Palmer 244 TERRACE DR. OSKALOOSA, IA. 52577		Newspaper Ads for Soup Supper	\$ 49.95	
10/27	Jimmy Carter 316 Glendale Rd. OSKALOOSA, IA. 52577		Soup Supper Meeting Room	40.-	
10/27	Dennis Palmer 244 TERRACE DR. OSKALOOSA, IA. 52577		Girl Scouts Delivery of Hand out ZEROX Copies	110.-	
11/1	Ferry D. FEENEY 2775 Oskaloosa Ave. OSKALOOSA, IA. 52577		(2) Newspaper Ads	49.95	
11/7	Barb Dickinsou 2376 Melino Ave. OSKALOOSA, IA. 52577		Radio Ads	25.65	
11/14	Bernice Hann Patterson 512 So. H. St. OSKALOOSA, IA.		Share of Rent for Meeting Room	10.-	

SUB-TOTAL \$ 285.55
 TOTAL (if last page of this schedule) \$ 285.55

*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.