

**DISCLOSURE SUMMARY PAGE**

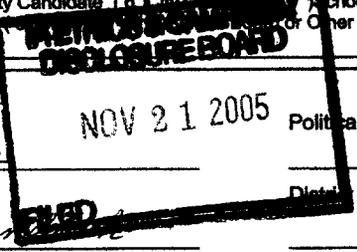
<b>FORM DR-2</b> (Rev. 07/2004)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. # _____	Logged In _____
Scanned _____	Computer _____
Audited _____	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
*Committee to Elect Lees Mayor*

**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 or Other Political Subdivision PAC ( 7 ) School Board or Other Political Subdivision PAC ( 8 ) County PAC ( 9 ) City or Other Political Subdivision PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY**

Candidate Name: *Merlyn Q. Lees* Political Party (if applicable): \_\_\_\_\_  
 Office Sought: *Mayor of Sherman* District (if Senate or House): \_\_\_\_\_



Late reports are subject to possible civil and criminal penalties.

*William E. Tack* (712) 246-2504 11-16-05  
**SIGNATURE OF PERSON FILING REPORT** **TELEPHONE** **DATE SIGNED**

I AM FILING A Final REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.  
 (report date) Indicate by #  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 DR-3 is filed.)

Local Committees, enter Date of Election  
November 8, 2005  
 County & Local Committees, enter County in which Election is held  
Page

**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>856.43</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>75.00</u>
Schedule F: Loans Received total (Attach Schedule F)	<u>- 0 -</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	<u>- 0 -</u>
<b>(Schedule H applies to Candidates' Committees Only)</b>	
<b>SUB-TOTAL</b>	\$ <u>931.43</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	<u>931.43</u>
Schedule F: Loan Repayments total (Attach Schedule F)	<u>- 0 -</u>
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ <u>- 0 -</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>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
<b>CANDIDATE COMMITTEES ONLY:</b>	
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$ <u>- 0 -</u>
<b>STATE COMMITTEES:</b> Submit a reconciled campaign account bank statement in January of each year.	

For Instructions, See Back of Form

Reset 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)  
*Committee to Elect Lees Mayse*

**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
10-13-05	ID# CK#	Jae and Marilyn Marsden 1301 South Elm Street Shenandoah, Iowa 51601	None	\$ 25.00	<input type="checkbox"/>
10-17-05	ID# CK#	Marilyn A. Fees 1306 South Maryland Shenandoah, Iowa 51601	The Candidate	461.43	<input type="checkbox"/>
10-17-05	ID# CK#	Mr & Mrs William E. Falk 1304 South Maryland Shenandoah, Iowa 51601	None	250.00	<input type="checkbox"/>
10-20-05	ID# CK#	Mr & Mrs Gordon Jones 1705 South Elm Street Shenandoah, Iowa 51601	None	100.00	<input type="checkbox"/>
10-18-05	ID# CK#	Unitized Contributions	None	20.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
10-28-05	ID# CK#	Tred Nordstrom 1343 Pelican Road Sanibel Island, Florida	None	50.00	<input type="checkbox"/>
11-3-05	ID# CK#	William Overby 604 Pershing Shenandoah, Iowa 51601	None	25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$	
<b>TOTAL (if last page of this schedule)</b>				\$	931.43

\* 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

Reset Form

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>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)  
*Committee to Elect Ayes Mayor*

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
10-31-05	ID# CK#	<i>Valley News Today 702 West Sheridan Shenandoah, Iowa 51601</i>	<i>Newspaper Advertising</i>	\$ 126.30
11-9-05	ID# CK#	<i>KML Radio 209 North Elm Street Shenandoah, Iowa 51601</i>	<i>Radio Advertising</i>	805.13
	ID# CK#			
SUB-TOTAL				\$
TOTAL (If last page of this schedule)				\$ 931.43

**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).)