

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

Reset Form

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)
Bob Quinn 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 Bob Quinn Political Party (if applicable) _____

Office Sought City Council West Des Moines @ large District (if Senate or House) _____

11/2/05

Late reports are subject to possible civil and criminal penalties.

[Signature] (H) 225-8124 11/2/05
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A November 3, 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>0</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>\$ 399⁰⁰</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>
(Schedule H applies to Candidates' Committees Only)		
SUB-TOTAL	\$	<u>\$ 399⁰⁰</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>\$ 399⁰⁰</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>\$ 0</u>

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0</u>
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>0</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES	<input checked="" type="checkbox"/> NO

CANDIDATE COMMITTEES ONLY:
 VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 0

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

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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)
Bob Quinn 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
10/1/05	ID# CK# 9357	Shelly Noyce 905 48th St. WDM, 50265		\$ 50 ⁰⁰	<input type="checkbox"/>
10/2/05	ID# CK# 10350	Carlvin McKelvey 316 31st St WDM, IA 50265		50 ⁰⁰	<input type="checkbox"/>
10/2/05	ID# CK# 6692	Kimberly K. Baley 5605 Cody Dr. WDM, IA 50266		\$ 50 ⁰⁰	<input type="checkbox"/>
10/3/05	ID# CK# 6461	Katherine Johnson 5925 E.P. Tru-er Parkway #31 WDM, IA 50266	Mother	\$ 25 ⁰⁰	<input type="checkbox"/>
10/4/05	ID# CK# 4816	Suzanne K. Davis 3200 Western Hills Dr. WDM, IA 50265		\$ 25 ⁰⁰	<input type="checkbox"/>
10/5/05	ID# CK# 10023	U.S. Commodities, Inc 1226 Grand Ave. #200 WDM, IA 50265		\$ 24 ⁰⁰	<input type="checkbox"/>
10/7/05	ID# CK# 1986	Raymond E. Meister 5806 Meadow Valley Ct. WDM, IA 50266		\$ 50 ⁰⁰	<input type="checkbox"/>
10/17/05	ID# CK# 2776	David Larson 909 50th St WDM, IA 50265		\$ 100 ⁰⁰	<input type="checkbox"/>
10/19/05	ID# CK# 1495	Phil Swartz 4776 Hawthorne Dr. WDM, IA 50265		25 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 399⁰⁰

TOTAL (if last page of this schedule)

\$ 399⁰⁰

* 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.

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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)
Bob Quinn 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
10/22/05 09/22/05	ID# CK# 0093	Bob Quinn 607 38th Street. West Des Moines, IA 50265	Copies, Wom voter disc. Postage office supplies	\$ 81.56
10/22/05	ID# CK# 0094	West Des Moines Postmaster 5th Street Valley Junction West Des Moines, IA 50265	postage	\$ 98.90
11/1/05	ID# CK# 0095	REL Productions 2045 Grand Ave Suite A West Des Moines, IA 50265	postcards	\$ 202.46
11/2/05	ID# CK# 0096	West Des Moines Postmaster 5th Street Valley Junction West Des Moines, IA 50265	postage	\$ 16.08
	ID# CK#			
SUB-TOTAL				\$ 399.00
TOTAL (If last page of this schedule)				\$ 399.00

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)(j).)