

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

Polk

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	_____
Logged In _____	_____
Scanned _____	_____
Computer _____	_____
Audited _____	_____

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

Trevillian For Council

IMPORTANT: Indicate by # type of committee you are reporting for: _____
 (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 _____ Political Party (if applicable) _____

Office Sought _____ District (if Senate or House) _____

JAN 19 2006
PM 1-17-06

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.

Ramin L. Trevillian (515) 279-0975 1-14-06
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A January 14, 2006 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 _____

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>552.53</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....		<u>290.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>200.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....		_____
<u>(Schedule H applies to Candidates' Committees Only)</u>		
	SUB-TOTAL	\$ <u>1042.53</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>739.52</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>200.00</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>103.01</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)	\$	<u>0</u>

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

For Instructions, See Back of Form

Reset 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)
Trevillian For 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
11-1-05	ID# CK# 1990	Bruce Clark 1905 Prospect Ave West Des Moines, IA 50265	N/A	\$ 30.00	<input type="checkbox"/>
11-3-05	ID# CK# 5326	Richard Hurd West Des Moines, IA 50265	N/A	50.00	<input type="checkbox"/>
11-28-05	ID# CK# CASH	Larry Donaghy 212 NE Englewood Dr. Ankeny, IA 50021	Father-in-law	100.00	<input type="checkbox"/>
11-28-05	ID# CK# cash	Norma Clegg 609 Ashworth West Des Moines, IA 50265	N/A	10.00	<input type="checkbox"/>
11-26-05 12-3-05	ID# CK# 8114	John Gallagher 3090 120th Cumming, IA 50061	N/A	50.00	<input type="checkbox"/>
12-7-05	ID# CK# 2080	Jan Olson 716-5th St. West Des Moines, IA 50265	N/A	50.00	<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				\$ 290.00	
TOTAL (if last page of this schedule)				\$ 290.00	

* 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

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.

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Trevillyan For 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
11-5-05	ID# CK# 1004	Sam's Club 1101-73 rd St Des Moines, IA 50311	Election Night Party supplies	\$ 220.82
11-5-05	ID# CK# 1005	Walmart 1001-73 rd Des Moines, IA 50311	Election Night Party supplies	18.80
11-8-05	ID# CK# 1006	Dahl's 3425 Ingersoll Des Moines, IA 50312	Ice For Election Night Party	3.70
11-13-05	ID# CK# 1007	Dahl's 1208 Prospect West Des Moines, IA 50265	Postage stamps	14.80
11-14-05	ID# CK# 1008	Office Max 2700 Ingersoll Des Moines, IA 50312	Thank You Notes & Envelopes	19.69
11-15-05	ID# CK# 1009	Polk County Election Office	Vote List From 11-8-05	28.00
11-21-05	ID# CK# 1010	Express Print 2911 Ingersoll Des Moines, IA 50312	Campaign Stickers	80.56
11-22-05	ID# CK# 1011	West Des Moines Press Citizen 525-505 St Des Moines, IA 50309	Campaign Ad	96.00
SUB-TOTAL				\$ 482.37
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).)



SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> 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)
Trevillian For 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
11-28-05	ID# CK# <i>cash</i>	<i>Sheraton West Des Moines 1800-50th St West Des Moines, IA 50266</i>	<i>Food For "Meet the Candidate" Night</i>	<i>\$ 23.20</i>
12-4-05	ID# CK# <i>1013</i>	<i>Sam's Club 1101-73rd St. Des Moines, IA 50311 50311</i>	<i>Election (Run-off) Night Party Supplies</i>	<i>141.44</i>
12-4-05	ID# CK# <i>1014</i>	<i>Walmart 1001-73rd St. Des Moines, IA 50311</i>	<i>Run off Election Night Party Supplies</i>	<i>13.21</i>
12-8-05	ID# CK# <i>1016</i>	<i>Cynthia Trevillian 722-5th St. West Des Moines, IA 50265</i>	<i>Reimbursement For Gas</i>	<i>29.30</i>
12-9-05	ID# CK# <i>1017</i>	<i>James Barnett 2085 Indian Way Oskaloosa, IA 52577</i>	<i>Signs</i>	<i>50.00</i>
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				<i>\$ 257.15</i>
TOTAL (if last page of this schedule)				<i>\$ 739.52</i>

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).)

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)
Trevillian For Council

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ _____

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
11-2-05	Cynthia Trevillian 722-5th St. West Des Moines, IA 50265	wife	\$ 200.00

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
12-8-05	Cynthia Trevillian 722-5th St. West Des Moines, IA 50265	wife	\$ 200.00

TOTAL (PART I) \$ 200.00

TOTAL CASH REPAYMENTS (PART II) \$ 200.00

From Schedule E -- TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0

*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 when it applies.