

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th St. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073



IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD
2007 OCT -4 AM 8:14

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

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

VOICES TO ELECT NATHAN BROWN

IMPORTANT: Indicate by # type of committee you are reporting for: 10
(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 NATHAN BROWN Political Party (if applicable) _____
Office Sought DAVENPORT ALDERMAN District (if Senate or House) 1ST WARD

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Thomas Ogilman (543) 386-2672 10/3/07
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 9-29-07 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 <u>10/9/07</u>
County & Local Committees, enter County in which Election is held <u>Scott</u>

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>-6-</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) ("also see in-kind below)	\$	<u>2,313.00</u>
Schedule F: Loans Received total (Attach Schedule F)	\$	<u>300.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	\$	
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>2,613.00</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below)	\$	<u>1,558.72</u>
Schedule F: Loan Repayments total (Attach Schedule F)	\$	<u>300.00</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero)	\$	<u>754.28</u>
**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)	\$	
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	
STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.		

For Instructions, See Back of Form

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
VOICES TO ELECT NATHAN BROWN

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), 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
1/22/07	ID# CK#	NATHAN BROWN 915 GUNN AVE TOW IA 52804	CANDIDATE	\$ 100.00	<input type="checkbox"/>
2/20/07	ID# CK#	" "	"	500.00	<input type="checkbox"/>
4/20/07	ID# CK#	POWA GOEGLIN 11224 GRAND AVE KANSAS CITY, MO 64114	AUNT	50.00	<input type="checkbox"/>
	ID# CK#	ARTHUR BROWN 11435 BROTHERTREE DR OSCEOLA, IN 46361	FATHER	200.00	<input type="checkbox"/>
	ID# CK#	WILLIAM GOEGLIN 2905 WHITEGATE DR FT WAYNE, IN 46805	GRAND FATHER	50.00	<input type="checkbox"/>
	ID# CK#	CHRISTINE GOEGLIN 1418 IONAS BLVD FORT WAYNE, IN 46845	AUNT	50.00	<input type="checkbox"/>
	ID# CK#	BRYAN BROWN 4630 PERIWINKLE LANE INDIANAPOLIS, IN 46220	COUSEN	50.00	<input type="checkbox"/>
	ID# CK#	BRENDA KNAPP 12552 1157A ST N LARGO, FL 32718		50.00	<input type="checkbox"/>
5/17/07	ID# CK#	STEVE JANA ANKENBROCK 9507 WITTEREND LANE FORT WAYNE, IN 46835	UNCLE AUNT	50.00	<input type="checkbox"/>
1	ID# CK#	JAMES + PAT DEVORCH 1811 VALLEY DR DAV IA 52804		20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1120.00	
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). 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. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Voters to Elect Nathan Brown

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.

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8/18/07	ID# CK#	LOM ENGELMANN 4552 MAJID DAV IA 52804		\$ 100.00	<input type="checkbox"/>
	ID# CK#	CANDY WINDLER 6 THOME CT DAV IA 52802		50.00	<input type="checkbox"/>
	ID# CK#	ANARLN HAP VOLZ 2309 WYNNEWOOD CT DAV IA 52807		25.00	<input type="checkbox"/>
	ID# CK#	LINDA JENSEN 6815 W 9TH ST DAV IA 52804		25.00	<input type="checkbox"/>
	ID# CK#	MISCELLANEOUS UNIDENTIFIED CASH		183.00	<input type="checkbox"/>
	ID# CK#	MARLENE ZAPP 1204 S VERMONT DAV IA 52802		15.00	<input type="checkbox"/>
	ID# CK#	BARB FAY 114 VALEY HIS RD BLUE GRASS, IA 52724		40.00	<input type="checkbox"/>
	ID# CK#	GLECK DUNN 1035 S CONCORD DAVENPORT, IA 52802		50.00	<input type="checkbox"/>
	ID# CK#	DENNIS DEPECKER 3400 CENTRAL BETT IA 52722		25.00	<input type="checkbox"/>
	ID# CK#	CATHY HART 2131 N HATFIELDSON DAV IA 52803		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 538.00	
TOTAL (if last page of this schedule)				\$	

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Voices To Elect Nathan Brown

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.

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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
8/18/07	ID# CK#	ALFRED MEYER 829 CEMARON DR DAV IA 52804		\$ 25.00	<input type="checkbox"/>
	ID# CK#	TRENCE SHANNON 829 CEMARON DR DAV IA 52804		25.00	<input type="checkbox"/>
	ID# CK#	MARY BYRAM 1850 W 59TH ST DAV IA 52804		25.00	<input type="checkbox"/>
	ID# CK#	LARRY D'ANTONIO 4205 KENNETH CT DAV IA 52804		20.00	<input type="checkbox"/>
	ID# CK#	ANNEMARIE HARKSEN 911 CEMARON DR DAV IA 52804		20.00	<input type="checkbox"/>
	ID# CK#	PATRICIA DUNN 3124 PEARL DAV IA 52802		20.00	<input type="checkbox"/>
	ID# CK#	SANDRA FREDERICKS 6142 145TH ST BLUE GRASS IA 52724		15.00	<input type="checkbox"/>
	ID# CK#	SOE FRENKHOFF 1033 KENTWOOD BLVD DAV IA 52803		35.00	<input type="checkbox"/>
	ID# CK#	CHARLES VOLLANTZ 901 CEMARON DR DAV IA 52804		50.00	<input type="checkbox"/>
	ID# CK#	KARL KRAMBICZ 333B TREMONT DAVENPORT IA 52803		25.00	<input type="checkbox"/>
SUB-TOTAL				\$260.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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

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

COMMITTEE NAME (Must be same as on Statement of Organization)
VOICES TO ELECT NATHAN BROWN

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.

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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
8/18/07	ID# CK#	EDWIN BROWN 2015 IOWA DAV IA 52803		\$ 20.00	<input type="checkbox"/>
8/29/07	ID# CK#	AARON LAKE 923 FREQUOIS DAV IA 52802		100.00	<input type="checkbox"/>
	ID# CK#	DICK + SARA MORATZ 718 S ROLFF ST DAV IA 52802		25.00	<input type="checkbox"/>
	ID# CK#	PONNA GREENSLAG 920 BEMARRON DR DAV IA 52802		25.00	<input type="checkbox"/>
	ID# CK#	JO ONKEN 802 S MISSISSIPPI BLUE GRASS, IA 52724		20.00	<input type="checkbox"/>
	ID# CK#	ROBERT ONKEN 1315 SUNRISE HEAS DR BETT IA 52722		50.00	<input type="checkbox"/>
	ID# CK#	MARY HIGGINSOTHAN 2503 W 3RD DAV IA 52802		25.00	<input type="checkbox"/>
	ID# CK#	BRIAN NAGLE 4207 WOODLAND CT DAV IA 52807		20.00	<input type="checkbox"/>
	ID# CK#	KRISTEN AASKENS 726 E LOWER AVE MESHAWARD, IA 51545	SISTER	30.00	<input type="checkbox"/>
	ID# CK#	CHARLES BROOKE 3236 PETER WOOD CT DAV IA 52807		80.00	<input type="checkbox"/>
SUB-TOTAL				\$395.00	
TOTAL (if last page of this schedule)				\$7313.00	

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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)
VOICES TO ELECT NATHAN BYLON

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
1/30/07	ID# CK#	WELLS FARGO BANK 666 WALNUT ST DES MOINES, IA 50309	CHEER PRINTING	\$ 29.75
2/7/07	ID# CK#	" " " " "	BANK SC's	2.14
3/7/07	ID# CK#	" " " " "	" "	2.14
4/16/07	ID# CK#	" " " " "	" "	2.14
4/16/07	ID# CK# 1002	PRECISION SIGNS 1055 VALLEY DR BETT IA 52722	CHARD SIGNS	695.50
4/28/07	ID# CK# 1003	JENAFER ATCHLEY 1818 VALLEY DR DAVENPORT, IA 52504	PHOTOGRAPHS FOR LITERATURE	25.00
5/1/07	ID# CK#	WELLS FARGO BANK 666 WALNUT ST DES MOINES, IA 50309	BANK SC's	4.82
6/7/07	ID# CK#	" " " " "	" "	4.82
SUB-TOTAL				\$ 766.31
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).)

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)
Voices To Elect Nathan Brown

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
7/1/07	ID# CK#	WELLS FARGO BANK 666 WALNUT ST DES MOINES, IA 50309	BANK SC'S	\$ 4.82
7/9/07	ID# CK# 1004	OFFICE MAX 320 W KEMBERLY DAN IA 52804	STAMP/ENVELOPES	27.11
7/10/07	ID# CK# 1005	REUSEW PRINTING 311 2157 ST ROCK ISLAND, IL 61201	PRINTING	210.06
7/20/07	ID# CK# 1006	OFFICE MAX 320 W KEMBERLY DAN IA 52804	FUNDRAISER SUPPLIES	24.35
8/7/07	ID# CK#	WELLS FARGO BANK 666 WALNUT ST DES MOINES, IA 50309	BANK SC'S	7.49
9/10/07	ID# CK#	" " "	" "	17.70
8/28/07	ID# CK# 1007	REUSEW PRINTING 311 2157 ST ROCK ISLAND, IL 61201	PRINTING	32.00
9/14/07	ID# CK#	WELLS FARGO BANK 666 WALNUT ST DES MOINES IA 50309	RETURN ITEM FEE	25.00
SUB-TOTAL				\$348.47
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).)

FOR INSTRUCTIONS, SEE BACK OF 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)
VOICES TO EVERY NATHAN BROWN

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
9/25/07	ID# CK# 1008	QUAD CITY TRUST MORTGAGE 5333 AVENUE OF THE CITIES MOUND, IA 50856	MAILING COST	\$443.94
	ID# CK#			
SUB-TOTAL				\$443.94
TOTAL (if last page of this schedule)				\$1,558.72

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).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
Voices To Elect NATHAN BROWN

SCHEDULE F (Rev. 07/03)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.
 TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ -0-

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.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
2/20/07	NATHAN BROWN 915 CLAM AVE DAVENPORT, IA 52804	CANDIDATE	\$ 300.00

TOTAL (PART I) \$ 300.00

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E - In-Kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT REPAID
6/22/07	NATHAN BROWN 915 CLAM AVE DAVENPORT, IA 52804	CANDIDATE	\$ 300.00

TOTAL CASH REPAYMENTS (PART II) \$ 300.00

From Schedule E - TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ -0-

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10/03/2007 WED 19:21 FAX 15633266204 KSTT Place Law Offices 010/010