

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

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD
2007 OCT -3 PM 4:40

COMMITTEE NAME (Must be same as on Statement of Organization)
Committee to Elect Tom CATWAAH
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

FORM DR-2
(Rev. 07/2007) **DISCLOSURE REPORT**

For Office Use Only
Comm. # _____
Logged In _____
Scanned _____
Computer _____
Audited _____

CANDIDATE COMMITTEES ONLY:
Candidate Name TOM CATWAAH Political Party (if applicable) _____
Office Sought ALDERMAN - DOVERPORT District (if Senate or House) 2ND WARD

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 CatwaaH (515) 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 #

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
10-9-07
County & Local Committees, enter County in which Election is held
SCOTT

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.) \$ -0-

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) 2,945.00

Schedule F: Loans Received total (Attach Schedule F)..... _____

Schedule H: Total Sales of Campaign Property (Attach Schedule H)..... _____

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL..... \$ 2,945.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)..... 521.66

Schedule F: Loan Repayments total (Attach Schedule F)..... _____

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$ 2,423.34

****UNPAID BILLS** (From Schedule D - Attach Schedule D)..... \$ _____

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)..... \$ 1,210.00

****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)
COMMITTEE TO ELECT TOM CANNAMAN

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
9/14/07	ID# CK#	CYNTHIA HEETER 1507 EMBURY DR DAVENPORT, IA 52804		\$ 25.00	<input type="checkbox"/>
	ID# CK#	GREG LEWIS 1816 E 22ND ST DES MOINES, IA 50317		50.00	<input type="checkbox"/>
	ID# CK#	MAITCHEL STUEE 232 THOMAS TER EDWARDSVILLE, IL 62025		75.00	<input type="checkbox"/>
	ID# CK#	STEVEN SEEGL 411 N COURT OTTUMWA, IA 52501		50.00	<input type="checkbox"/>
9/20/07	ID# CK#	ROD BAKER 204 BROOKSIDE DR PATRICIABURG, IA 50665		15.00	<input type="checkbox"/>
	ID# 9681 CK# 1022	UNITED STAFF UNION OF IOWA PAC 4320 NW 2ND ST DES MOINES, IA 50313		100.00	<input type="checkbox"/>
	ID# CK#	MARCOA NICHOLS 5917 GREENWALK PL #203 JOHNSTON, IA 50131		50.00	<input type="checkbox"/>
	ID# CK# 1210	OPERATIVE PLASTERERS + Cement Masons #18 PAC 400 NE JEFFERSON STE 300 PEORIA, IL 61603		25.00	<input type="checkbox"/>
	ID# CK# 2530	QUAD CITY FEDERATION OF LABOR - COPE AEM 311 1/2 21ST ST RAIK ISLAND, IL 61201		500.00	<input type="checkbox"/>
	ID# CK#	LYNDE POHAST 3952 HWY 146 GILMAN, IA 50106		10.00	<input type="checkbox"/>
SUB-TOTAL				\$ 900.00	
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)
Committee to Elect Tom CATANHAN

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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9/20/07	ID# CK#	FRANK WOOD 1135 TRAILS ELDRIDGE, IA 52748		\$ 25.00	<input type="checkbox"/>
9/20/07	ID# CK#	MISCELLANEOUS UNIDENTIFIED BASIS		170.00	<input type="checkbox"/>
9/26/07	ID# CK#	EATEL BRAGA 2303 EMERALD DR DAV IA 52504		50.00	<input type="checkbox"/>
	ID# CK#	RANDY + LUANEN DODSON 5817 USIA DAVENPORT, IA 52504		75.00	<input type="checkbox"/>
	ID# CK#	CECILE SIMMONS 314 VALLEY RIDGE CT BLUE GRASS, IA 52724		50.00	<input type="checkbox"/>
	ID# CK# 2552	AFSCME AFL-CIO PAC 1625 L ST NW WASHINGTON, DC 20034		500.00	<input type="checkbox"/>
	ID# CK#	AUDREY LINDVALL 1127 W 15TH ST DAVENPORT, IA 52504		20.00	<input type="checkbox"/>
	ID# CK#	MATT PAUL 4146 COLLEGE AVE DES MOINES, IA 50311		100.00	<input type="checkbox"/>
	ID# CK#	MICHAEL BLOWIN 970 GROVE TERRACE DUBUQUE, IA 52001		50.00	<input type="checkbox"/>
	ID# CK#	PRET DE KOEIK 3415 EASTERN #202 DAV IA 52507		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1140.00	
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)
COMMITTEE TO ELECT TOM CATNAHAN

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
9/26/07	ID# CK#	JENNIFER HAN 4746 W 192ND MAJOR CHICAGO, IL 60646		\$ 100.00	<input type="checkbox"/>
	ID# CK#	ELESIA GRANNAN 1515 KENOSHA CT DAV IA 52804		100.00	<input type="checkbox"/>
	ID# CK#	PATSY KEEHNER 1589 N PINE LN VICTORIA, IL 61485		50.00	<input type="checkbox"/>
	ID# CK#	MARY ELLEN CHAMBERLIN 709 GRAND AVE DAV IA 52803		50.00	<input type="checkbox"/>
	ID# CK#	TYRONNE BOYKAMP 33 OAK LAKE DAV IA 52803		50.00	<input type="checkbox"/>
	ID# CK#	ROYANNA MORTITZ 220 N ELMWOOD DAV IA 52802		25.00	<input type="checkbox"/>
	ID# CK#	THOMAS WOLFE 1905 KEMERALD DR DAV IA 52804		25.00	<input type="checkbox"/>
	ID# CK#	BRUCE KEARBY 2632 N CLARK DAV IA 52804		25.00	<input type="checkbox"/>
	ID# CK#	CHARLES GALLEN 2217 E 45TH ST DAV IA 52807		25.00	<input type="checkbox"/>
	ID# CK#	JAMES LOBLESS 7171 W 60TH ST LOT 31 DAV IA 52804		25.00	<input type="checkbox"/>
SUB-TOTAL				\$475.00	
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)
COMMITTEE TO ELECT TOM CARWANAAN

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
9/26/07	ID# CK#	REBEKAH GAYMAN 1515 KENOSHA CT PAV IA 52804		\$ 25.00	<input type="checkbox"/>
9/26/07	ID# CK#	MISCELLANEOUS UNITS 260 CA 54		405.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<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				\$ 430.00	
TOTAL (if last page of this schedule)				\$ 2995.00	

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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)
COMMITTEE TO ELECT Tom CARNAHAN

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
9/14/07	ID# CK#	REVIEW PRINTING 311 21ST ST ROCK ISLAND, IL 61201	PRINTING	\$ 97.00
9/15/07	ID# CK#	POSTMASTER 902 W 2ND ST DAV IA 52802	POSTAGE	41.00
9/16/07	ID# CK#	OFFICE MAX 821 W KIMBERLY DAV IA 52806	LABELS/ENVELOPES 16.55 PRINTER INK 71.68	88.23
9/21/07	ID# CK#	POSTMASTER 902 W 2ND ST DAV IA 52802	STAMPS	6.20
9/24/07	ID# CK#	REVIEW PRINTING 311 21ST ST ROCK ISLAND, IL 61201	PAPER	40.00
9/26/07	ID# CK#	THOMAS PROESTLER 2140 E 53RD DAV IA 52807	FUND RAISING SUPPLIES	40.51
9/27/07	ID# CK#	POSTMASTER 902 W 2ND ST DAV IA 52802	STAMPS	5.20
9/26/07	ID# CK#	HYVEE 7351 W LOCUST DAV IA 52804	FOOD FOR FUNDRAISER	103.22
SUB-TOTAL				\$ 421.66
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)(j).)

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)
Committee to Elect Tom Catwahan

DATE EXPENDED (MM/DD/YYR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/26/07	ID# CK#	JENO'S LITTLE HUNGARY 4909 N. PAUL DAVENPORT, IA 52801	FUNDRAISER	\$ 100.00
	ID# CK#			
SUB-TOTAL				\$ 100.00
TOTAL (if last page of this schedule)				\$ 521.66

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)
COMMITTEE TO EUREK TOM CATLAHAN

SCHEDULE E (Rev. 08/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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
9-1 To 9/30/07	CITIZENS FOR A BETTER DAVENPORT 2721 E PLEASANT DAV IA 52803		CREATIVE/CONSULTING SERVICES PHOTOGRAPHY	\$ 450.00	<input type="checkbox"/>
9/29/07	AFSCME IOWA COUNCIL 61 P.E.O.P.L.E. 4320 NW 2ND AVE DES MOINES, IA 50315		YARD SIGNS	760.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 1210.00
 TOTAL (if last page of this schedule) \$ 1,210.00

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