

7004 1160 0005 8723 1180
Scott

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

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)

WINBORN FOR MAYOR

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 EDWIN G. WINBORN Political Party (if applicable) _____

Office Sought MAYOR OF DAVENPORT District (if Senate or House) _____

JAN 17 2006
CM 1.13.06

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.

[Signature] 563-391-8563 1-13-06
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A JAN. 9, 2006 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 _____

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>1213.25</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>7,045.00</u>
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	\$	<u>8,258.25</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>4,385.46</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>3,000.00</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>872.79</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

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)
WINBORN FOR MAYOR

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
11/3/05	ID# CK#	CONSTANCE DECKER 2961 HALCYON DRIVE BETTENDORF IOWA 52722		\$ 200.00	<input type="checkbox"/>
11/3/05	ID# CK#	ROBERT E. TAPPENDORF 4410 RICKER HILL RD. DAVENPORT, IOWA 52802		100.00	<input type="checkbox"/>
11/3/05	ID# CK#	WILLIAM BARRETT 2901 MARQUETTE ST. DAVENPORT IOWA 52804		50.00	<input type="checkbox"/>
11/2/05	ID# CK#	LEE A. SCHNEIDER 3113 CANAL SHORE DR. HELLAIRE, IOWA 52753		100.00	<input type="checkbox"/>
11/2/05	ID# CK#	JON WEETS 1823 BELLE AVE DAVENPORT IOWA 52803		100.00	<input type="checkbox"/>
11/2/05	ID# CK#	FRANK OVERBECK 1408 W 52ND ST. DAVENPORT IOWA 52806		300.00	<input type="checkbox"/>
11/2/05	ID# CK#	PETER L. BRITT 227 FORREST ROAD DAVENPORT, IOWA 52803		25.00	<input type="checkbox"/>
11/2/05	ID# CK#	WILLIAM G. MCCARTHY 1339 CEDAR ST. DAVENPORT IOWA 52804		200.00	<input type="checkbox"/>
11/2/05	ID# CK#	DON S. CHALLED 5 McCLELLAN BLVD DAVENPORT IOWA 52803		100.00	<input type="checkbox"/>
11/2/05	ID# CK#	RONALD A. MAY #3 HIGH POINT PLACE BETTENDORF, IOWA 52722		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1,275.00	
TOTAL (if last page of this schedule)				\$ 7,045.00	

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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)
WINBORN FOR MAYOR

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
11/2/05	ID# CK#	SHEILA M. SPEER 2231 E. 45 th STREET DAVENPORT, IOWA 52807		\$ 300.00	<input type="checkbox"/>
11/3/05	ID# CK#	LAURA E. STANLER 3828 E. 61 st BLVD. DAVENPORT, IOWA 52807		25.00	<input type="checkbox"/>
11/4/05	ID# CK#	JOHN (JACK) BUSH 11 OAK PARK DR. BETTENDORF, IA 52722		50.00	<input type="checkbox"/>
11/4/05	ID# CK#	RICHARD J. COUSSENS 4528 TELEGRAPH RD. DAVENPORT, IOWA 52807		500.00	<input type="checkbox"/>
11/4/05	ID# CK#	OSCAR HAWLEY 2170 NORMAN CT. SOUTH BETTENDORF, IA 52722		500.00	<input type="checkbox"/>
11/4/05	ID# CK#	BERNARD R. MACK 2236 CROMWELL CIRCLE DAVENPORT, IOWA 52807		50.00	<input type="checkbox"/>
11/5/05	ID# CK#	BILL FENNELLY 1117 GARFIELD CT. DAVENPORT, IA 52804		200.00	<input type="checkbox"/>
11/7/05	ID# CK#	ROBERT A. WOLFE 4907 TURNBERRY CT. DAVENPORT, IOWA 52807		100.00	<input type="checkbox"/>
11/7/05	ID# CK#	WILLIAM D. ASHTON 2831 E. PLEASANT ST. DAVENPORT, IOWA 52803		250.00	<input type="checkbox"/>
11/7/05	ID# CK#	JAMES R. TANK 2002 E. 50 th COURT DAVENPORT, IOWA 52807		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2025.00	
TOTAL (if last page of this schedule)				\$	

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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)
WINBORN FOR MAYOR

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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
11/7/05	ID# CK#	JOHN BUSHMAN 2113 E. 13 th ST. DAVENPORT IA. 52803		\$ 200.00	<input type="checkbox"/>
11/7/05	ID# CK#	MICHAEL J. KANE 17180 305 th STREET LONG GROVE, IOWA 52756		50.00	<input type="checkbox"/>
11/7/05	ID# CK#	KENNETH C. OSSIAN 2562 OLD FREEPORT CT. BETTENDORF, IA. 52722		100.00	<input type="checkbox"/>
11/7/05	ID# CK#	DAVID R. HOLST 737 20 th AVE. MOLINE, IL. 61265		25.00	<input type="checkbox"/>
11/7/05	ID# CK#	JERRY D GOLDSTEIN 2076 LUNDY LANE BETTENDORF, IOWA 52722		100.00	<input type="checkbox"/>
11/8/05	ID# CK#	JIM G. PAUSTIAN 1310 W. 43RD ST. DAVENPORT, IOWA 52806		75.00	<input type="checkbox"/>
11/8/05	ID# CK#	LEA A. FARKAS 5220 GRAND AVE. DAVENPORT IOWA 52807		100.00	<input type="checkbox"/>
11/8/05	ID# CK#	MICHAEL L. WHANEN 2140 SAINT ANDREWS CIRCLE BETTENDORF, IOWA 52722		200.00	<input type="checkbox"/>
11/8/05	ID# CK#	THOMAS A WILSON 145 FOREST ROAD DAVENPORT IOWA 52803		50.00	<input type="checkbox"/>
11/8/05	ID# CK#	WILLIAM L. BURRESS 5306 W 11 th ST. DAVENPORT, IOWA 52804		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1000.00	
TOTAL (if last page of this schedule)				\$	

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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)
WINBORN FOR MAYOR

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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
11/8/05	ID# CK#	DENNIS (TERRY) HESTER 2845 E. 42ND CT. DAVENPORT, IOWA 52807		\$ 100.00	<input type="checkbox"/>
11/9/05	ID# CK#	DANIEL NAGLE 126 S. 1 ST . ST. LONG GROVE, IA 52756		50.00	<input type="checkbox"/>
11/9/05	ID# CK#	J. PETER SCHEBLER 2621 E. 41 ST ST. DAVENPORT IOWA 52807		25.00	<input type="checkbox"/>
11/9/05	ID# CK#	THOMAS L. WINE 1414 W. LOCUST ST. DAVENPORT, IA 52804		75.00	<input type="checkbox"/>
11/9/05	ID# CK#	BURDETTE W. HAGEN 3930 BELLE AVE. DAVENPORT IA. 52807		50.00	<input type="checkbox"/>
11/9/05	ID# CK#	WILLIAM J. SCHEBLER 1441 SPRING GREEN DR. DAVENPORT, IOWA 52804		25.00	<input type="checkbox"/>
11/9/05	ID# CK#	JAMES F. SPAETH 123 RIDGEWOOD AVE. DAVENPORT, IA 52803		25.00	<input type="checkbox"/>
11/9/05	ID# CK#	CRIS TOWNSEND 223 McLELLAN BLVD DAVENPORT IA 52803		100.00	<input type="checkbox"/>
11/9/05	ID# CK#	PETER G POHLMANN 270 235 FERNWOOD DAVENPORT IA 52803		250.00	<input type="checkbox"/>
11/9/05	ID# CK#	WILLIAM W. EHLERS 2421 FAIRHAVEN RD DAVENPORT, IA. 52803		25.00	<input type="checkbox"/>
SUB-TOTAL				\$ 725.00	
TOTAL (if last page of this schedule)				\$	

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<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)
WINBORN FOR MAYOR

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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
11/10/05	ID# CK#	MARK A. ZIMMERMAN 2432 FULTON AVE. DAVENPORT, IOWA 52803		\$ 100.00	<input type="checkbox"/>
11/10/05	ID# CK#	FRANK P. LOW 1400 LANGER CT. ELDRIDGE, IA. 52748		100.00	<input type="checkbox"/>
11/12/05	ID# CK#	BERNARD C. O'BRIEN 14 OAKBROOK PLACE BETTENDORF, IA 52722		100.00	<input type="checkbox"/>
11/12/05	ID# CK#	JOE SLAVENS 2101 GRETCHEN CT. BETTENDORF, IA 52722		25.00	<input type="checkbox"/>
11/14/05	ID# CK#	ROGER E. PERT 20 GLENWOOD AVE. DAVENPORT, IA 52803		50.00	<input type="checkbox"/>
11/14/05	ID# CK#	MICHAEL HAMANN 2233 E. 47 th ST. DAVENPORT, IOWA 52807		20.00	<input type="checkbox"/>
11/14/05	ID# CK#	JAMES E. ASHTON 6218 GEORGIAN COURT DALLAS, TX. 75254		200.00	<input type="checkbox"/>
11/15/05	ID# CK#	DAVID J. ASHTON 610 S. DUBUQUE ST. SOLON, IA 52333		50.00	<input type="checkbox"/>
11/16/05	ID# CK#	K. DANIEL OEVRIES 2546 E. COLUMBIA AVE. DAVENPORT, IOWA 52803		100.00	<input type="checkbox"/>
11/16/05	ID# CK#	DANIEL F. PALMER 3007 45 th ST. MOLINE, IL. 61265		500.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1,245.00	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

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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)

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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
11/16/05	ID# CK#	CURTIS E. BEASON 220 N. MAIN ST. DAVENPORT, IOWA 52801		\$ 400.00	<input type="checkbox"/>
11/17/05	ID# CK#	GREGORY J. KAUTZ 6545 THOMAS CT. BETTENDORF, IA 52722		100.00	<input type="checkbox"/>
11/17/05	ID# CK#	L. WAYNE WOOD 2026 E. 46 th ST. DAVENPORT IA 52807		50.00	<input type="checkbox"/>
11/22/05	ID# CK#	KENT PILCHER 6525 THOMAS CT. BETTENDORF IA 52722		50.00	<input type="checkbox"/>
12/20/05	ID# CK#	MARTHA D'ALBESSANDRO 8212 LLOYD ALLYNS WAY RELEIGH, N.C. 27615		75.00	<input type="checkbox"/>
12/20/05	ID# CK#	MARY S. RAYBURN 1821 PINEACRE AVE. DAVENPORT IA 52803		100.00	<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				\$ 775.00	
TOTAL (if last page of this schedule)				\$ 7045.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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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)
 WINBORN FOR MAYOR COMMITTEE

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#	S. J. SMITH 3707 W RIVER DRIVE DAVENPORT, IOWA 52802	HELIUM FOR BALLOONS	\$ 84.68
11/2/05	ID# CK#	DAVENPORT POST OFFICE DAVENPORT, IA 52802	POSTAGE STAMPS	134.00
11/8/05	ID# CK#	11 th ST. BAR + GRILL 2108 E. 11 th ST. DAVENPORT IA 52803	ELECTION PARTY	151.00
11/14/05	ID# CK#	ASHTON ENGINEERING 1225 E. RIVER DRIVE DAVENPORT, IA 52803	CARDS/LETTERS STAMPS ENVELOPES ADVERTISING	1047.00
11/16/05	ID# CK#	THE BRANDT CO. 3020 HICKORY GROVE RD. DAVENPORT, IA 52806	POST CARD & MAILING	2968.78
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 4,385.46
TOTAL (if last page of this schedule)				\$ 4,385.46

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)

WINBORN FOR MAYOR

Reset Form

SCHEDULE E (Rev. 06/97)	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
11/3/05	PIPER MILL 1477 DREW AVE. DAVIS			\$	<input type="checkbox"/>
11/3/05	CHERYL RIGDON 822 MISSISSIPPI AVE DAVENPORT, IA 52803		WEBSITE FEES	41.95	<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 \$ 41.95
 TOTAL (if last page of this schedule) \$ 41.95

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Reset Form

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

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 \$ 4,000.00

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
			\$

TOTAL (PART I) \$ _____

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
11/16/05	EDWIN G. WINBORN 2102 E. 13 th ST. DAVENPORT, IA. 52803	CANDIDATE	\$ 3,000.00

TOTAL CASH REPAYMENTS (PART II) \$ 3,000.00

From Schedule E -- TOTAL LOANS FORGIVEN \$ _____

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,000.00

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