

Scott

FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	_____
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

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

CITIZENS FOR ENGELMANN

**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: TOM ENGELMANN Political Party (if applicable): \_\_\_\_\_

Office Sought: DAVENPORT ALDERMAN District (if Senate or House): \_\_\_\_\_

JAN 19 2006  
PM 1-18-06

Late reports are subject to possible civil and criminal penalties.

Thomas Engelmann SIGNATURE OF PERSON FILING REPORT      563-356-2672 TELEPHONE      1/17/06 DATE SIGNED

I AM FILING A 12-31-05 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 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.) ..... \$ 5005.71

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 1,175.00

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**..... \$ 6,180.71

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)..... 2,220.99

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) (Attach DR-3) ..... \$ 3959.72

\*\*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)

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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
CITIZENS FOR ENGELMANN

**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
11/2/05	ID# CK#	JIM HAYEK 2224 ELM DAVENPORT, IA 52803		\$ 25.00	<input type="checkbox"/>
	ID# CK#	MARGARET HATHAWAY 2503 GAINES DAV IA 52804		25.00	<input type="checkbox"/>
	ID# CK#	ANN MCBUSIKEN 1005 E HIGHT DAV IA 52803		25.00	<input type="checkbox"/>
	ID# CK#	TOM MORITZ 220 N ELMWOOD DAV IA 52802		25.00	<input type="checkbox"/>
	ID# CK#	LARRY ROBERTSON 5450 MATRUETTE DAV IA 52804		30.00	<input type="checkbox"/>
	ID# CK#	KATEW HEAN 1130 KIRKWOOD BLVD DAV IA 52803		50.00	<input type="checkbox"/>
	ID# CK#	JIM LYKAN 2906 W 35TH ST DAV IA 52806		50.00	<input type="checkbox"/>
	ID# CK#	PAT WALTON 3510 FLOBIKINGHAM DAV IA 52802		50.00	<input type="checkbox"/>
	ID# CK#	JOHN WETZEL 2613 2ND ST MOUNK, IL 61244		50.00	<input type="checkbox"/>
	ID# CK#	LARRY D'AVIREMONT 4205 KLEWING CT DAV IA 52804		50.00	<input type="checkbox"/>
SUB-TOTAL				\$ 380.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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)

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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
*CITIZENS FOR ENGELMANN*

**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#	JAY JUSTIN 505 W DOVER CT DAV IA 52803		\$ 100.00	<input type="checkbox"/>
11/7/05	ID# CK#	MARIE FLAHERTY 104 COLONY DR DAV IA 52804		25.00	<input type="checkbox"/>
	ID# CK#	JEM HANCOCK 2163 W 30TH ST DAV IA 52804		50.00	<input type="checkbox"/>
	ID# CK#	DAVID SWINA 3852 MARQUETTE DAV IA 52804		50.00	<input type="checkbox"/>
	ID# CK#	JAMIE HOWARD 2425 ELM DAV IA 52803		75.00	<input type="checkbox"/>
	ID# CK#	GEORGE M. TOWNSEND PO Box 3832 ROCK ISLAND IL 61204		200.00	<input type="checkbox"/>
11/9/05	ID# 6085 CK# 804	IA STATE BUILDING TRADES COUNSEL 110 10TH AVE NW ALTOONA, IA 50009	PAC	100.00	<input type="checkbox"/>
	ID# CK#	TOM FEY 5608 KENSINGTON CIRCLE JOHNSTON, IA 50131		25.00	<input type="checkbox"/>
11/16/05	ID# CK#	CANDY PASTERNAK 2931 E LOCUST DAV IA 52803		150.00	<input type="checkbox"/>
	ID# CK#	MARGARET PAULOS 2507 BELLE DAV IA 52803		20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 795.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 1,175.00	

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</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)  
*CITIZENS FOR ENGELMANN*

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
11/1/05	ID# CK# 556	QUAD CITY DIRECT MAIL 5333 AVE OF CITIES MOLINE, IL 61265	MAILING	\$ 348.26
11/3/05	ID# CK# 558	" "	"	1135.83
11/1/05	ID# CK# 557	PREVIEW PRINTING 311 2157 ST TROPIC ISLAND, IL 61701	PRINTING	350.15
11/3/05	ID# CK# 559	" "	"	366.75
12/31/05	ID# CK# 561	STATE OF IOWA 510 E 12TH ST STE 1A DES MOINES, IA 50319	LATE FEE	20.00
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 2220.99  
TOTAL (if last page of this schedule) \$ 2220.99

**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).)