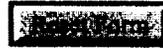


FOR INSTRUCTIONS, SEE BACK OF FORM

# DISCLOSURE SUMMARY PAGE



<b>FORM DR-2</b> (Rev 07/2004)	DISCLOSURE REPORT
-----------------------------------	-------------------

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

Committee to Elect Ryan Doll

**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

**CANDIDATE COMMITTEES ONLY:**

Candidate Name	Political Party (if applicable)
Ryan Doll	N/A
Office Sought	District (if Senate or House)
Ames City Council - Ward 3	N/A

**For Office Use Only**

Comm # \_\_\_\_\_

Logged In \_\_\_\_\_

Scanned \_\_\_\_\_

Computer \_\_\_\_\_

Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties.

Dave Larson  
SIGNATURE OF PERSON FILING REPORT

515.460.2190  
TELEPHONE

11/3/2005  
DATE SIGNED

I AM FILING A November 3, 2005 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 November 8, 2005
County & Local Committees, enter County in which Election is held Story

## 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) 3,384.00

Schedule F: Loans Received total (Attach Schedule F) 600.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... \$ 3,984.00

### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) 2,754.22

Schedule F: Loan Repayments total (Attach Schedule F) 0

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3) \$ 1,229.78

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 0

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 31.21

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 600.00

### CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)  YES  NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 0

For Instructions, See Back of Form



SCHEDULE <b>A</b> (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)  
Committee to Elect Ryan Doll

**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
07/18/2005	ID# CK#	William Rock 616 Billy Sunday Rd #306 Ames IA 50010		\$20	<input type="checkbox"/>
07/21/2005	ID# CK#	Merlin Pfannkuch 1424 Kellogg Ames IA 50010		100	<input type="checkbox"/>
08/14/2005	ID# CK#	Susan Ravenscroft 455 Westwood Dr. Ames IA 50014		150	<input type="checkbox"/>
08/15/2005	ID# CK#	Mary K. Sand 245 Todd Circle Ames IA 50014		50	<input type="checkbox"/>
08/21/2005	ID# CK#	Francis X. Doll 5006 Lakewood Dr. Norwalk IA 50211	Parent	150	<input type="checkbox"/>
08/28/2005	ID# CK#	Karen A. Krebs 2304 Parkhill Dr. Norwalk IA 50211	Parent	50	<input type="checkbox"/>
09/02/2005	ID# CK#	Leslie O. Pensack 317 Wilmoth Ave. Ames IA 50014		50	<input type="checkbox"/>
09/02/2005	ID# CK#	Unitemized Contributions Pass the Hat - Drinking Liberally		65	<input type="checkbox"/>
09/14/2005	ID# CK#	Carol Fuchs 806 Brookridge Ave. Ames IA 50010		100	<input type="checkbox"/>
09/18/2005	ID# CK#	Karen A. Krebs 2304 Parkhill Dr. Norwalk IA 50211	Parent	100	<input type="checkbox"/>
SUB-TOTAL				\$ 835	
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



<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)**

Committee to Elect Ryan Doll

**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
09/23/2005	ID# CK#	Susan Ravenscroft 455 Westwood Dr. Ames IA 50014		\$100	<input type="checkbox"/>
09/27/2005	ID# CK#	Ben Handsaker 309 Opal Circle Ames IA 50014		100	<input type="checkbox"/>
10/11/2005	ID# CK#	James Pritchard 1206 Orchard Drive Ames IA 50010		20	<input type="checkbox"/>
10/11/2005	ID# CK#	Ed Caubrey 3313 Morningside St. Ames IA 50011		5	<input type="checkbox"/>
10/11/2005	ID# CK#	Marcia Mincar 2221 Storm St Ames IA 50014		50	<input type="checkbox"/>
10/11/2005	ID# 25073 CK# 1005	Ames Citizens for Better Local Government 4316 Phoenix Street Ames IA 50014		2000	<input type="checkbox"/>
10/12/2005	ID# CK#	Matt Lemons 1300 Coconino Road #138 Ames IA 50011		10	<input type="checkbox"/>
10/19/2005	ID# CK#	Joseph K. Rippetoe 419 Pearson Ave. Ames IA 50014		25	<input type="checkbox"/>
10/21/2005	ID# CK#	Thomas Weber 430 Lynn Avenue Ames IA 50014		25	<input type="checkbox"/>
10/23/2005	ID# CK#	Pam L. Sargent 2129 Stevenson Ames IA 50014		100	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 2435	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form



<b>SCHEDULE A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
	<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)

Committee to Elect Ryan Doll

**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
10/26/2005	ID# CK#	Brandon Gray 44D Schilleter Village Ames IA 50010		\$5	<input type="checkbox"/>
10/27/2005	ID# CK#	Henry Alliger 2215 Storm St. Ames IA 50010		5	<input type="checkbox"/>
10/27/2005	ID# CK#	Chelsea Lepley 114 7th St. Ames IA 50010		5	<input type="checkbox"/>
10/27/2005	ID# CK#	Robert Dick 114 7th St. Ames IA 50010		5	<input type="checkbox"/>
10/27/2005	ID# CK#	Mara Spooner 3219 Cottie Dr. Ames IA 50014		5	<input type="checkbox"/>
10/27/2005	ID# CK#	Erin Marth 307 Lynn #303 Ames IA 50013		5	<input type="checkbox"/>
10/28/2005	ID# CK#	Elizabeth Rock 416 Grandwood #8 Ames IA 50010		5	<input type="checkbox"/>
10/28/2005	ID# CK#	Mansoor Khadir 4325 Todd Dr. Ames IA 50014		5	<input type="checkbox"/>
10/28/2005	ID# CK#	Louis Kishkunas 805 Yuma Ames IA 50014		10	<input type="checkbox"/>
10/28/2005	ID# CK#	Drew Larson 3130 Turnberry #200 Ames IA 50014		5	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 55	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form



<b>SCHEDULE A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
	<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)**

Committee to Elect Ryan Doll 11/02/2005

**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
10/28/2005	ID# CK#	Elizabeth Larson 3130 Turnberry #200 Ames IA 50014		\$5	<input type="checkbox"/>
11/01/2005	ID# CK#	Kyle Perkins 3206 Lincoln Way #4 Ames IA 50014		5	<input type="checkbox"/>
11/01/2005	ID# CK#	Sarah Sunderman 2519 Chamberlain #209 Ames IA 50014		5	<input type="checkbox"/>
11/01/2005	ID# CK#	Ted Nelsen 4325 Todd Dr. Ames IA 50014		1	<input type="checkbox"/>
11/02/2005	ID# CK#	Kelly Considine 119 Stanton Ave. #502 Ames IA 50014		1	<input type="checkbox"/>
11/02/2005	ID# CK#	Gabe Whitaker 510 South 4th St Ames IA 50014		1	<input type="checkbox"/>
11/02/2005	ID# CK#	Erica Carnes 120 McDonald Dr. Ames IA 50014		1	<input type="checkbox"/>
11/02/2005	ID# CK#	Matt Campbell 3229 LeHie St. Ames IA 50014		2	<input type="checkbox"/>
11/02/2005	ID# CK#	Brian Coffman 3206 Lincoln Way #4 Ames IA 50014		5	<input type="checkbox"/>
11/02/2005	ID# CK#	Katherine Gidlewski 1332 Frederiksen Ct. Ames IA 50010		1	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 27	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form



<b>SCHEDULE A</b> (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)

Committee to Elect Ryan Doll

**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
11/02/2005	ID# CK#	Jennifer Eggleston 1521 Little Bluestem Ct Ames IA 50014		\$1	<input type="checkbox"/>
11/02/2005	ID# CK#	David Grinney 2265 Welch Cassell Ames IA 50013		20	<input type="checkbox"/>
11/02/2005	ID# CK#	Katherine Lundberg 125 Lyon Hall Ames IA 50013		1	<input type="checkbox"/>
11/02/2005	ID# CK#	Sheena Spurgin 6124 Frederiksen Ct Ames IA 50010		1	<input type="checkbox"/>
11/02/2005	ID# CK#	Olivia Maicrs 2125 Greeley Ames IA 50014		1	<input type="checkbox"/>
11/02/2005	ID# CK#	Debra Lauterbach 2136 Frederiksen Ct Ames IA 50010		1	<input type="checkbox"/>
11/02/2005	ID# CK#	Devon Walker 120 McDonald Dr. Ames IA 50014		3	<input type="checkbox"/>
11/02/2005	ID# CK#	Andrew D. Miller 2035 Sunset Dr. Ames IA 50014		1	<input type="checkbox"/>
11/02/2005	ID# CK#	Myron Batsa 304 Lynn Ave #8 Ames IA 50014		1	<input type="checkbox"/>
11/03/2005	ID# CK#	Jason J. Lackore 2253 Frilcy Godfrey Ames IA 50014		2	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 32	
<b>TOTAL (if last page of this schedule)</b>				\$ 3384	

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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>B</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)  
Committee to Elect Ryan Doll

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
07/16/2005	ID# CK#	David Stout	Reimbursement for Domain Name Purchase	\$ 8.10
07/26/2005	ID# CK#	Staples 1333 Buckeye Avenue Amcs IA 50010	Blank Business Cards	14.33
07/27/2005	ID# CK#	Staples 1333 Buckeye Avenue Ames IA 50011	Thank-yous, 20 stamps.	14.78
08/14/2005	ID# CK#	PayPal.com www.paypal.com	Charge for Withdrawal of Funds	14.80
08/18/2005	ID# CK#	Staples 1333 Buckeye Avenue Ames IA 50010	Clipboards, pens, and folders.	18.02
08/28/2005	ID# CK#	Drew Larson 3130 Turnberry #200 Ames IA 50014	Reimbursement for Button Parts	76.95
09/17/2005	ID# CK#	Ryan Doll 6101 Buchanan Hall Ames IA 50010	Reimbursement for Voter Reg. Copies	20.00
09/29/2005	ID# CK#	Sigler Company 413 Northwestern Avenue Ames IA 50010	Brochures - Sigler Company	765.05
SUB-TOTAL				\$ 932.03
<b>TOTAL (if last page of this schedule)</b>				\$

**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>B</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)  
Committee to Elect Ryan Doll

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
09/29/2005	ID# CK#	Ryan Doll 6101 Buchanan Hall Ames IA 50010	Reimbursement for Voter Reg. Copies	\$ 33.44
10/12/2005	ID# CK#	Sign-Pro 619 S 4th Street Ames IA 50010	Yard Signs!	612.58
10/12/2005	ID# CK#	Alpha Copies 2310 Lincoln Way Ames IA 50010	Absentee Ballot Copies	33.19
10/19/2005	ID# CK#	Copyworks 105 Welch Avenue Ames IA 50012	Ryan Doll Lapel Stickers - 10,000	478.18
10/19/2005	ID# CK#	Alpha Copies 2310 Lincoln Way Ames IA 50010	Voter Reg Copies	16.05
10/24/2005	ID# CK#	Mediacom 225 S. Dayton Ave. Ames IA 50010	Cable Commercial	506.25
11/02/2005	ID# CK#	Toons Box 181 Kelley LA 50134	Toons Advertisement	142.50
	ID# CK#			
SUB-TOTAL				\$ 1822.19
<b>TOTAL (If last page of this schedule)</b>				<b>\$ 2754.22</b>

**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 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 Elect Ryan Doll



SCHEDULE <b>E</b> (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
08/14/2005	Justen Jones Lyon Barker Ames IA 50011		Cookies for Meet and Greet	\$ 11.36	<input type="checkbox"/>
08/14/2005	Ryan Doll 6101 Buchanan Hall Ames IA 50010	Candidate	Lemonade for Meet and Greet	13.85	<input type="checkbox"/>
09/23/2005	Drew Larson 3130 Turnberry #200 Ames IA 50014		Labor for Making Buttons Usage Cost	6.00	<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 \$ 31.21

TOTAL (if last page of this schedule) \$ 31.21

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.



SCHEDULE <b>F</b> (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)

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.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
06/23/2005	Ryan Doll 6101 Buchanan Hall Ames IA 50010	Candidate	\$ 100
08/14/2005	Ryan Doll 6101 Buchanan Hall Ames IA 50010	Candidate	500

TOTAL (PART I) \$ 600

**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
			\$

TOTAL CASH REPAYMENTS (PART II) \$ 0

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 600

\*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.