

DISCLOSURE SUMMARY PAGE

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

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

Aistrops for Council

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: *Gordon Aistrops* Political Party (if applicable): _____

Office Sought: *City Councilman for OTTUMWA* District (if Senate or House): _____

NOV 1 2005

Late reports are subject to possible civil and criminal penalties.

Ernest L. Hanna (641) 684-5881 10-29-05

SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 5 days prior to General Election 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
November 8, 2005 (General)
 County & Local Committees, enter County in which Election is held
Wapeello

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>854⁹⁶</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>1,640⁰⁰</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>-0-</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>-0-</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>2,494⁹⁶</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>2,076²⁴</u>
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)	\$	<u>418⁷⁰</u>

**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>-0-</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>-0-</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>-0-</u>

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)
Aistropé for Council

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
10-5-05	ID# CK#	Jon m. Wiegard 602 Winchester Rd. OTTUMWA, IA 52501		\$ 50 ⁰⁰	<input type="checkbox"/>
10-5-05	ID# CK#	Randy J. Zorn 2 Reynon Dr OTTUMWA, IA		100 ⁰⁰	<input type="checkbox"/>
10-5-05	ID# CK#	Eldon Hunsicker 1912 N. Elm St OTTUMWA, IA 52501		150 ⁰⁰	<input type="checkbox"/>
10-6-05	ID# CK#	E. Marie Purnoy 1405 N. Jefferson St. OTTUMWA, IA 52501		50 ⁰⁰	<input type="checkbox"/>
10-12-05	ID# CK#	J. Brent Atfyllisch 40 Woodshire Dr. OTTUMWA, IA 52501		100 ⁰⁰	<input type="checkbox"/>
10-12-05	ID# CK#	misc cash		100 ⁰⁰	<input type="checkbox"/>
10-20-05	ID# CK#	misc		20 ⁰⁰	<input type="checkbox"/>
10-20-05	ID# CK#	Hugh Mcloy 2359 Timberlane Hts OTTUMWA, IA 52501		25 ⁰⁰	<input type="checkbox"/>
10-20-05	ID# CK#	Patrick Curran 501 E. Aita Vista Ave OTTUMWA, IA 52501		100 ⁰⁰	<input type="checkbox"/>
10-20-05	ID# CK#	James A. Griffin 159 Vanness Ave OTTUMWA, IA 52501		50 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 745 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

Reset 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)

Aistrophe for Council

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10-24-05	ID# CK# 2441	John Helgeson 11374 140th St. OTTUMWA, IA 52501		\$ 250 ⁰⁰	<input type="checkbox"/>
10-26-05	ID# CK# 5404	Richard J. Geumer 1734 Elm St. OTTUMWA, IA 52501		100 ⁰⁰	<input type="checkbox"/>
10-27-05	ID# CK# 1514	Dr. J. Brent & Catherine Aitfollisch 40 Woodshire Dr. OTTUMWA, IA 52501		100 ⁰⁰	<input type="checkbox"/>
10-27-05	ID# CK# 11504	Thomas X Lazio 2301 N. Court OTTUMWA, IA 52501		50 ⁰⁰	<input type="checkbox"/>
10-27-05	ID# CK# 2413	Nancy A. Mank 6 Ryan Dr. OTTUMWA, IA 52501		75 ⁰⁰	<input type="checkbox"/>
10-27-05	ID# CK# 2931	Eric L or Kimberly M. Roush 5 Ryan Dr. OTTUMWA, IA 52501		150 ⁰⁰	<input type="checkbox"/>
10-27-05	ID# CK# 3442	Robert A. Helgeson 12205 Angle Rd. OTTUMWA, IA 52501		100 ⁰⁰	<input type="checkbox"/>
10-29-05	ID# CK#	MISC.		20 ⁰⁰	<input type="checkbox"/>
10-29-05	ID# CK# 4710	Margarette Johnson 1212 Hamilton St. OTTUMWA, IA 52501		50 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 895⁰⁰

TOTAL (if last page of this schedule)

\$ 1640⁰⁰

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset 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)
Aistropo for Council

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
10-26-05	ID# CK# 2	OTTUMWA COURIER 213 E. 2nd St. OTTUMWA, IA 52501	NEWSPAPER ads - Aistropo for City Council	\$ 255 92
10-27-05	ID# CK# 3	KBIZ/KRKN 414 E. Main St OTTUMWA, IA 52501	Radio ads - Aistropo for City Council	752 12
10-28-05	ID# CK# 4	OTTUMWA PRINTING, Inc. 105 S. Birch OTTUMWA, IA 52501	Yard signs - Gordon Aistropo for Council	1,005 67
10-29-05	ID# CK# 5	Gordon Aistropo 10 Raydon Drive OTTUMWA, IA 52501	precinct map 425 copy of 11-6-04 city election 4/25, stamps 3700 P.O. Box Rental 2004 - out of POCKET EXPENSES by Gordon Aistropo	42 50
	ID# CK#			

SUB-TOTAL \$ 2,076 26
TOTAL (if last page of this schedule) \$ 2,076 26

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.6(3)(i).)