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

Reset Form

IA ETHICS AND CAMPAIGN DISCLOSURE BD
2008 JAN 18 PM 4:32

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

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

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

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

CANDIDATE COMMITTEES ONLY:
Candidate Name: MIKE HOBART
Political Party (If applicable): N/A
Office Sought: MAYOR OF SIOUX CITY
District (If Senate or House): ____

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

Mike Hobart — SIGNATURE OF PERSON FILING REPORT
712-899-8297 — TELEPHONE
1-17-08 — DATE SIGNED

I AM FILING A Jan 19th 2008 (report date) REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR. Indicate by # 2

☐ 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: NOV 6, 2007
County & Local Committees, enter County in which Election is held: WOODBURY

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.) ..... $	3,873.95
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	3920.00
Schedule F: Loans Received total (Attach Schedule F)	1,000.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	-0-
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL ..... $	8,793.95
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	7,878.08
Schedule F: Loan Repayments total (Attach Schedule F)	915.87
CASH ON HAND at the end of this reporting period (if final report balance must be zero) ..... $	-0-
**UNPAID BILLS (From Schedule D - Attach Schedule D) ..... $	-0-
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... $	175.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... $	-0-
CONSULTANT BREAKDOWN (Schedule G Attached?)	___ YES X NO
CANDIDATE COMMITTEES ONLY:	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $	-0-

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ 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)*
MIKE HOBART 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.

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
10-29-07	ID# CK#	Frances Sadler 4415 Manor Circle Iowa City IA 51104		$50.00	
10-29-07	ID# CK#	Dr RJ Dohrmann 2800 Pierce St #202 Iowa City IA 51104		200.00	
10-29-07	ID# CK#	Mrs James Yannas 3915 Sylvania Way Iowa City IA 51104		500.00	
10-29-07	ID# CK#	Rita Grimm 4214 Country Club Blvd Iowa City IA 51104		100.00	
10-29-07	ID# CK#	Frank Briemo 6810 Norwood Ct Iowa City IA 51106		100.00	
10-29-07	ID# CK#	Duane O'Hern 5611 Myers Ave Iowa City IA 51106		20.00	
10-29-07	ID# CK#	Patricia Calhoun 4018 Adams St Iowa City IA 51106		15.00	
10-30-07	ID# CK#	Emma Hewitt 4800 Bradford Dr Iowa City IA 51106		50.00	
10-30-07	ID# CK#	Daniel Weakley 4501 Cheyenne Blvd Iowa City IA 51104		25.00	
10-30-07	ID# CK#	John Bean 135 West Gilmore Ter Iowa City IA 51104		10.00	

SUB-TOTAL $1,070.00

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

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ 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)*
MIKE HOBART FOR MAYOR

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10-30-07	ID# CK#	Kent Vriezelaar 209 Lindenwood Pl Sioux City IA 51104		$ 100.00	☐
10-30-07	ID# CK#	Milwaukee Wiener House LC 309 Pearl St Sioux City IA 51101		100.00	☐
10-30-07	ID# CK#	Emmanuel Bekakis PO Box 1678 Sioux City IA 51102		40.00	☐
10-30-07	ID# CK#	Barbara Orzechowski 3715 Martin Yard Sioux City IA 51104		50.00	☐
10-30-07	ID# CK#	Arlo Herbold 2511 S Newton St Sioux City IA 51106		50.00	☐
10-30-07	ID# CK#	Linn Hall 4415 Buckwalter Sioux City IA 51105		30.00	☐
10-31-07	ID# CK#	Robert Deck 56 McDonald Dr Sioux City IA 51104		100.00	☐
10-31-07	ID# CK#	Dennis Bullock 2818 Mulberry Ct Sioux City IA 51106		25.00	☐
10-31-07	ID# CK#	Mayor Kanter 608 32nd St Sioux City IA 51104		50.00	☐
10-31-07	ID# CK#	Teresa O'Brien 701 Pierce St Sioux City IA 51101		50.00	☐

SUB-TOTAL $ 595.00

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
☐ 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)*

Mike Hobart 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
10-31-07	ID# CK#	Thomas Journey 2425 E Jefferson Iowa City IA 51104		$ 30.00	☐
10-31-07	ID# CK#	Wayne Ducommun 2212 Salisbury Iowa City IA 51106		20.00	☐
10-31-07	ID# CK#	George Gardiner 4001 Military Rd Iowa City IA 51103		50.00	☐
10-31-07	ID# CK#	Penny Fox 2901 Nebraska Iowa City IA 51104		50.00	☐
11-1-07	ID# CK#	Kaes Foley 2000 Center Dr N apt 311 Iowa City IA 51104		100.00	☐
11-1-07	ID# CK#	Charles Patterson 1339 Fox Ridge Trl Iowa City IA 51104		150.00	☐
11-1-07	ID# CK#	Margaret Prahl 1339 Fox Ridge Trl Iowa City IA 51104		100.00	☐
11-1-07	ID# CK#	Sandra Kangal 2324 Indian Hills Dr Iowa City IA 51104		50.00	☐
11-1-07	ID# CK#	Peter Benson * 3701 S Brine Path Iowa City IA 51104		50.00	☐
11-1-07	ID# CK#	Darrell Baker DDS 35 Quail Ct Iowa City IA 51104		100.00	☐

SUB-TOTAL $ 700.00

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
☐ 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)*
Mike HoBART 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
11-1-07	ID# CK#	Dorsk + Deck LLP 635 Frances Bldg 505 5th St Sioux City IA 51101		$ 150.00	
11-1-07	ID# CK#	Robert Sieff 3923 Country club Sioux city IA 51104		50.00	
11-1-07	ID# CK#	Fran Palmersheim 1316 29th Sioux city IA 51104		20.00	
11-1-07	ID# CK#	Robert Sabel 3660 Lindenwood Sioux city IA 51104		50.00	
11-2-07	ID# CK#	Della Grindberg 4602 Lincoln Way Sioux city IA 51106		15.00	
11-2-07	ID# CK#	Richard Nutt 31796 476 ave Elk Point SD 57025		100.00	
11-2-07	ID# CK#	James Bernstein 940 Spyglass circle Dakota Dunes SD 57049		200.00	
11-5-07	ID# CK#	Richard Bertrand 1501 Peavey St Sioux city IA 51105		200.00	
11-5-07	ID# CK#	James Cosgrove 3519 Jackson St Sioux city IA 51104		25.00	
11-5-07	ID# CK#	Paul Adamson 5604 Lorraine ave Sioux city IA 51106		20.00	

SUB-TOTAL $830.00

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
☐ 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)*
Mike HoBART 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
11-5-07	ID# CK#	Ron Jorgenson 5929 Pine View Dr Sioux City IA 51106		$ 50.00	☐
11-5-07	ID# CK#	Sandra Champion 2311 S Cypress St Sioux City IA 51106		50.00	☐
11-5-07	ID# CK#	John Mayne 3832 Nebraska St Sioux City IA 51104		125.00	☐
11-5-07	ID# CK#	William Cohen MD Box 385 Sioux City IA 51102		100.00	☐
11-5-07	ID# CK#	Karen Ludvigson PO 5025 Sioux City IA 51102		25.00	☐
11-6-07	ID# CK#	Karen Goodwin 4920 Country Club Blvd Sioux City IA 51104		50.00	☐
11-6-07	ID# CK#	Raleigh Zucker 520 Pierce #273 Sioux City IA 51101		50.00	☐
11-8-07	ID# CK#	Beverly Hinds 3121 Grandview Blvd Sioux City IA 51104		25.00	☐
11-14-07	ID# CK#	Caroline Sands* 2420 E Selway Sioux City IA 51104		50.00	☐
12-5-07	ID# CK#	Tom Kingsbury 32356 K-22 Sioux City IA 51108		100.00	☐

SUB-TOTAL $625.00

TOTAL *(If last page of this schedule)* $

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ 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)*
Mike Hobart for Mayor

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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 then 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
12-6-07	ID# CK#	anne James 1309 35th St Sioux City IA 51104		$ 50.00	☐
11-5-07	ID# CK#	Bud Bornholtz 917 36th St Sioux City IA 51104		50.00	☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
	ID# CK#				☐
			SUB-TOTAL	$ 100.00	
			TOTAL *(If last page of this schedule)*	$3920.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Mike Hobart for Mayor

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
10-30-07	ID# CK#	Home Depot 415 Cunningham Dr Sioux City IA 51101	Posts	$ 42.47
10-29-07	ID# CK#	Record Printing 1117 Villa ave Sioux City IA 51101	Print on acct Signs Brochures	1,400.00
11-1-07	ID# CK#	USPO 214 Jackson Sioux City IA 51101	Stamps	123.00
11-1-07	ID# CK#	Staples 2848 S Lakepoint Sioux City IA 51106	Signs	104.86
11-6-07	ID# CK#	Home Depot 415 Cunningham Dr Sioux City IA 51101	Supplies	8.44
11-7-07	ID# CK#	Record Printing 1117 Villa ave Sioux City IA 51103	Signs Brochures Cards	3,145.65
11-8-07	ID# CK#	KMNS 1113 Nebraska St Sioux City IA 51105	Radio ads	340.00
11-8-07	ID# CK#	KMNS 1113 Nebraska St Sioux City IA 51105	Radio ads	61.20

SUB-TOTAL $ 5225.62

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)(l).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES

☐ CHECK THIS BOX IF AMENDING 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.

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Mike Hobart for Mayor

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
11-13-07	ID# CK#	Powell Broadcasting 3000 Indian Hills Dr Iowa City IA 51104	Radio ads	$ 1,075.65
12-19-07	ID# CK#	Guarantee Roofing 2005 4th St Iowa City IA 51101	Mail House	1,502.81
12-21-07	ID# CK#	Lionland Chamber of Commerce 101 Pierce St Iowa City IA 51101	Mailing list.	70.00
1-10-08	ID# CK#	Security National Bank 601 Pierce St Iowa City IA 51101	Bank Fee	4.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL $ 2,652.46

TOTAL *(if last page of this schedule)* $ 7,878.08

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 Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Mike Hobart for Mayor

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SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS

☐ 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
1-1-08	G Guarantee Roofing 2005 4th St Sioux City IA 51104		Sign post	$ 175.00	☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
					☐
			SUB-TOTAL	$ 175.00	
			TOTAL (If last page of this schedule)	$ 175.00	

*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.

FOR INSTRUCTIONS, SEE BACK OF FORM

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

Mike HoBART FOR MAYOR

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SCHEDULE **F** (Rev. 07/03) — **LOANS RECEIVED & REPAID**

☐ 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 $ -0-

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
10-29-07	Mike HoBART 2805 Isabella St Sioux City IA 51103	Candidate	$ 1,000.00

TOTAL *(PART I)* $ 1,000.00

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
1-15-08	Mike HoBART 2805 Isabella St Sioux City IA 51103	Candidate	$ 915.87

TOTAL CASH REPAYMENTS *(PART II)* $ 915.87

From Schedule E -- TOTAL LOANS FORGIVEN $ 84.13

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD $ -0-

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