

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE**

FORM <b>DR-2</b> (Rev. 07/2004)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	<u>13475</u>
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

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

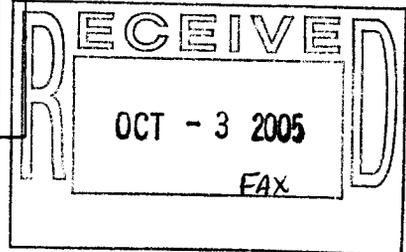
**CITIZENS FOR HOFFMAN**

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 BRENT HOFFMAN Political Party (if applicable) \_\_\_\_\_

Office Sought CITY COUNCIL (SIOUX CITY) District (if Senate or House) \_\_\_\_\_



Late reports are subject to possible civil and criminal penalties.

*Brent Hoffman* SIGNATURE OF PERSON FILING REPORT TELEPHONE (712) 251-5344 DATE SIGNED Oct. 3<sup>rd</sup>, 2005

I AM FILING A PRIMARY (OCT 3<sup>rd</sup>, 2005) 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  
PRIMARY: OCTOBER 11<sup>th</sup>, 2005  
 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 <b>MUST</b> be the same as the cash on hand at the end of the last reporting period or <u>must be zero</u> if this is first report filed.)	\$	<u>0.</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A) ( <del>also see in kind below</del> )	\$	<u>4,460.</u>
Schedule F: Loans Received total (Attach Schedule F)	\$	<u>1,000.</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>5,460.</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B) ( <del>also see debts and loans below</del> )	\$	<u>4,938.40</u>
Schedule F: Loan Repayments total (Attach Schedule F)	\$	<u>0.</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>521.60</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0.</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>400.</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>1,000.</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
<b>CANDIDATE COMMITTEES ONLY:</b>		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0.</u>

**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)

SCHEDULE <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 HOFFMAN**

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-RAISING INCOME
08/03/05	ID# CK#	Dr. Greg Hoversten 4705 Stone Park Blvd Sioux City, IA 51103		\$ 100.	
08/03/05	ID# CK#	Kevin Alons 140 Galland St Salix, IA 51052		100.	
08/04/05	ID# CK#	Keith Raftig 3503 Broken Kettle Rd Sioux City, IA 51104		25.	
08/04/05	ID# CK#	Ron Wieck 920 Morningside Ave Sioux City, IA 51106	-Confirmed- not Insurance Account	250.	
08/06/05	ID# CK#	George Tsiobanos 2024 Ravens Ct Sioux City, IA 51104		200.	
08/03/05	ID# CK#	Stanley Navrudic 4343 018 Lakeport Rd Sioux City, IA 51106		250.	
08/02/05	ID# CK#	Brett Schoneman 1819 4th St SW Mason City, IA 50401		100.	
08/11/05	ID# CK#	William Taylor 414 Kingsberry Ct Sergeant Bluff, IA 51054		100.	
8/11/05	ID# CK#	Elbert Stockton 3334 Transit Ave Sioux City, IA 51106		250.	
8/11/05	ID# CK#	Kenneth Chastain 3515 Lady Anne Ct Alexandria, VA 22310		100.	
SUB-TOTAL				\$ 1475	
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.

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

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/YYR)	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
8/11/05	ID# CK#	David Whittbeck 34-2 Whistler Dr Freehold, NJ 07728		\$ 100.	
8/11/05	ID# CK#	James Witt 3105 Medina Dr Garland, TX 75041		35.	
8/17/05	ID# CK#	4 E 5th 916 Grandview Blvd Sioux City, IA 51101		100.	
8/17/05	ID# CK#	Heather Sotero 2511 Jackson St Sioux City, IA 51104	Sister	100.	
8/17/05	ID# CK#	Rev. Ken Stein 334 Brandywine Rd Mason City, IA 50401	Father-in-law	100.	
8/17/05	ID# CK#	Charles Wise 213 Main Dr Cokesville, TX 76528		100.	
8/17/05	ID# CK#	Christian Severinghaus 2800 Greenway Ln Vienna, VA 22180		100.	
8/17/05	ID# CK#	Carol Sech 1631 Alton Medina Dr Sugarland, TX 77479		100.	
8/17/05	ID# CK#	Jennifer Hoffmann PO Box 985 Angel Fire, NM 87710	Sister-in-law	200.	
8/17/05	ID# CK#	Reinhold Hoffmann 1402 Jackson St Sioux City, IA 51104	Father	500.	

SUB-TOTAL  
 \$ 1435  
 TOTAL (if last page of this schedule)  
 \$

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

**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
8/17/05	ID# CK#	Katie Batcheller 1518 Aztec Circle Sioux City, IA 51101		\$ 50.	
8/19/05	ID# CK#	Phuong Yokitis 123 Mt Vernon Ave Alexandria, VA 22301		50.	
8/22/05	ID# CK#	Gill Abernathy 1013 N. Terrill St Alexandria, VA 22304		50.	
8/22/05	ID# CK#	Christine Gramlich 760 Toncas Way Ft Walton Beach, FL 32547		25.	
8/22/05	ID# CK#	Suzie Flannery 1024 21st St. W. Des Moines, IA 50265		50.	
8/23/05	ID# CK#	Jo Ellen Johnson 2001 Country Club Rd Indianola, IA 50125-1195	Aunt (In-law)	100.	
8/25/05	ID# CK#	Richard Stead PO. Box 1449 Los Alamos, NM 87554-1449		100.	
8/29/05	ID# CK#	Paul Jackson 2545 Williams Ave Sioux City, IA 51106		50.	
9/01/05	ID# CK#	M. K. Wise 931 N. 14th St Waco, TX 76707-2914		250.	
9/01/05	ID# CK#	Charles Ubelhart 13127 Sparrowtail Ln Fairfax, VA 22033		100.	
SUB-TOTAL				\$ 825	3,735.
TOTAL (if last page of this schedule)				\$	

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

**CITIZENS FOR HOFFMAN**

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

**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
09/06/05	ID# CK#	Theresa Niemeier 1802 24th St South Arlington, VA 22202		\$ 250.	
9/12/05	ID# CK#	Victor Castillo 2801 Kalmia Lee Ct, # 202 Falls Church, VA 22042		100.	
9/12/05	ID# CK#	Barbara Ann Crassley <del>7342</del> 31705 Westbrook St Cedar Falls, IA 50613		75.	
9/12/05	ID# CK#	Lisa Jordan 13344 Potomac Park Dr Woodbridge, VA 22111		50.	
9/12/05	ID# CK#	Robert Houlahan Piper Trailway Bldg, #600 Sioux City, IA 51101		25.	
9/16/05	ID# CK#	Wendy Wright 3100 S. Maadestev St, # 538 Falls Church, VA 22044		100.	
9/14/05	ID# CK#	Caran McKee 905 Douglas Dr McLean, VA 22101		25.	
9/30/05	ID# CK#	Matthew Chilton #18 Heritage Place Sioux City, IA 51106	NOTE: Lost Item Sch A, 10/3/05	100.	
	ID# CK#				
	ID# CK#				

SUB-TOTAL

\$ 725

TOTAL (if last page of this schedule)

\$4,460.

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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 HOFFMAN**

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
06/22/05	ID# CK#	Midwest Printers 1011 Grandview Blvd Sioux City, IA 51103	Campaign Handouts (layout + Printing) (#2001)	\$ 160.50
06/28/05	ID# CK#	Am Legion Post 64 1501 Geneva St Sioux City, IA 51103	Advertisement (#2002)	20.00
06/02/05	ID# CK#	Harland Checks c/o Security Nat'l Bank 201 Pierce St Sioux City, IA 51101	Checking Account (checks) (DRAFT-DEBIT)	13.95
08/18/05	ID# CK#	Brent Hoffman (Candidate) 3905 Sylvian Ave Sioux City, IA 51104	Candidate Reimbursement (Box Rental, Card + Stamp, Website, Stickers, + T-Shirts) (#2005)	747.21
08/18/05	ID# CK#	Brent Hoffman	Candidate Reimbursement (Yard Signs + Banners) (#2006)	971.30
08/28/05	ID# CK#	New World Enterprises 413 Tyler St Sioux City, IA	Tickets and A&A (see In-kind) (#2003)	100.
09/07/05	ID# CK# 2007	Victory Signs 520 SW 30th St Davenport, IA 52802	Signs	1,103.81
09/26/05	ID# CK#	Cable One 1119 1st St, Ste 218 Sioux City, IA 51101	Media-Advertising	1,522.00
SUB-TOTAL				\$ 4,638.80
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)(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)

CITIZENS FOR HOFFMAN

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
09/30/05	ID# CK#	MIDWEST PRINTERS 1011 Grandview Blvd Sioux City, IA 51103	PRINTING	\$ 299.60
	ID# CK#			

SUB-TOTAL \$ 299.60

TOTAL (If last page of this schedule) \$ 4,938.40

**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).)



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

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0. **First Report (New)**

**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.)

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
(Loans forgiven must be reported on Schedule C -- In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
05/18/05	Brent Hoffman 3107 Sylvan Ave Sioux City, IA 51104	Candidate	\$ 1,000.

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT REPAYED
			\$

TOTAL (PART I) \$ 1,000.

TOTAL CASH REPAYMENTS (PART II) \$ 0.

From Schedule C -- TOTAL LOANS FORGIVEN \$ 0.

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,000.

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SCHEDULE <b>F</b> (Rev. 07/03)	LOANS RECEIVED & REPAYED
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	