

Woodbury

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	13542
Logged In	
Scanned	
Computer	
Audited	

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

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: Jim Rixner Political Party (if applicable): _____
 Office Sought: Sioux City City Council District (if Senate or House): _____

Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF PERSON FILING REPORT: [Signature] TELEPHONE: (712) 258-7855 DATE SIGNED: 10/1/05

I AM FILING A October 1st 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 _____
County & Local Committees, enter County in which Election is held _____

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) 2,515.00

Schedule F: Loans Received total (Attach Schedule F) 4,600.00

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

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 7,115.00

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 5,866.43

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) \$ 1,248.57

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

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 595.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 4600.00

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

CANDIDATE COMMITTEES ONLY:

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

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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)
RIVER 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
8/23/05	ID# CK#	AL STURGEON 507 75T. SIOUX CITY, IA. 51101	NONE	\$ 00 500.	<input type="checkbox"/>
8/15/05	ID# CK#	TIMOTHY S. BOTTARO 1915 HEIGHTS AVE. SIOUX CITY, IA. 51104	NONE	00 100	<input type="checkbox"/>
9/9/05	ID# CK#	JOSEPH M. PUETZ 2027 RAVENS QT. SIOUX CITY, IA. 51104	"	00 100	<input type="checkbox"/>
9/12/05	ID# CK#	UNITEDIZED	-	00 20	<input type="checkbox"/>
9/13/05	ID# CK#	DEBORAH J. COOK 2727 JACKSON ST. SIOUX CITY, IA. 51104	NONE	00 250.	<input type="checkbox"/>
9/13/05	ID# CK#	KENNETH A. BEEKLEY 603 ST ANDREW'S DAKOTA DUNES, SD. 57049	"	00 100.	<input type="checkbox"/>
9/15/05	ID# CK#	JAMES H. SARBS 2430 E. SOLWAY ST. SIOUX CITY, IA. 51104	"	00 200	<input type="checkbox"/>
9/15/05	ID# CK#	BARBARA BENSON 3701 S. BRIAR PATH SIOUX CITY, IA. 51104	"	00 100	<input type="checkbox"/>
9/15/05	ID# CK#	MARGARET PRAHL 1339 FOX RIDGE TRAIL SIOUX CITY, IA. 51104	"	00 50	<input type="checkbox"/>
9/21/05	ID# CK#	LANCE MORGAN P.O. Box 369 WINNEBAGO, NE. 68071	"	00 500	<input type="checkbox"/>
SUB-TOTAL				\$1920.00	
TOTAL (if last page of this schedule)				\$1920.00	

* 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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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)
RIVER FOR COUNCIL

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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
9/22/05	ID# CK#	DELORES M. PHILLIPS 47897 335th St. JEFFERSON, S.D. 57038	NONE	\$ 30.00	<input type="checkbox"/>
9/23/05	ID# CK#	RICHARD E. HAYES 2553 CASSEL PL. SIOUX CITY, IA. 51103	"	100.00	<input type="checkbox"/>
9/24/05	ID# CK#	ROBERT E. SCOTT 916 GRANDVIEW BLVD SIOUX CITY, IA. 51101	"	100.00	<input type="checkbox"/>
9/26/05	ID# CK#	KENNETH A. BEEKLEY 603 ST. ANDREWS DARKESS DUNES, S.D. 57049	"	150.00	<input type="checkbox"/>
9/30/05	ID# CK#	unitemized	-	20.00	<input type="checkbox"/>
9/30/05	ID# CK#	Sue Lilla 1112 34th St. Sioux City, IA. 51104-1922	NONE	25.00	<input type="checkbox"/>
9/30/05	ID# CK#	Roger Wendt 2313 Seneca way Sioux City, IA. 51104-1502	"	50.00	<input type="checkbox"/>
9/30/05	ID# CK#	K.G. Skip Perley 524 Pelletier Dr. Sioux City, IA 51104	"	50.00	<input type="checkbox"/>
9/30/05	ID# CK#	ANNE JAMES 1309 35th St. SIOUX CITY, IA 51104	"	50.00	<input type="checkbox"/>
9/30/05	ID# CK#	unitemized	-	20.00	<input type="checkbox"/>
SUB-TOTAL				\$595.00	
TOTAL (if last page of this schedule)				2,575.00 2,575.00	

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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)
RINNER 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
<i>9/20/05</i>	ID# CK#	<i>AVERY OUTDOOR 2420 CORRECTIONVILLE RD (P.O. Box 235 S.C. IA. 51102) SIoux CITY, IA 51106</i>	<i>Billboards</i>	<i>\$ 4,616.⁷⁶/₁₀₀</i>
<i>9/23/05</i>	ID# CK#	<i>CARTER PRINTING 1739 E GRAND AVE. DES MOINES, IA 50316</i>	<i>Wires (Rods) for Yard Signs</i>	<i>291.50</i>
<i>9/30/05</i>	ID# CK#	<i>RECORD PRINTING 1117 VILLA AVE SIoux CITY, IA 51103</i>	<i>500 yard Signs</i>	<i>958.17</i>
	ID# CK#			
SUB-TOTAL				<i>\$ 866.43</i>
TOTAL (if last page of this schedule)				<i>\$ 5866.43</i>

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)
RIXNER FOR COUNCIL

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$

Reset Form

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

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 E -- 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
	Jim Rixner 114 Midvale Ave. 9/17/05 Sioux City, IA 51104	Self	\$ 4,600 ⁰⁰

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

TOTAL (PART I) \$ 4,600⁰⁰

TOTAL CASH REPAYMENTS (PART II) \$

From Schedule E -- TOTAL LOANS FORGIVEN \$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 4,600.00

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