

FORM DR-2 (Rev. 01/2001)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>1397</u>
Indexed	<u>SW</u>
Audited	
Computer	

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

IMPORTANT: Indicate type of committee you are reporting for: 1

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
 (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
 (8) Support Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name Jim Lykam Political Party Democrat
 Office Sought State Representative District (if Senate or House) 85th

Barbara Lykam SIGNATURE OF TREASURER (or person filing this report) (563) 391-1919 TELEPHONE 10-27-04 DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A October 29, (report date) **STATE OF IOWA** OR AN/A (1) ELECTION // (2) NON-ELECTION YEAR. Indicate one 1

CHECK IF AMENDMENT TO REPORT DATED NOV 1 2004
pm 10 27

Check if this is final (termination) report and a copy of Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.)

FILED
 NOV 1 2004
 pm 10 27

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. (This is the total of all monies 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>8,147.25</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)	<u>2,925.00</u>
Schedule F: Loans Received total (Attach Schedule F).....	<u>650.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....	<u> </u>
(Schedule H applies to Candidates' Committees Only)	
SUB-TOTAL.....	\$ <u>11,722.25</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...	<u>10,416.70</u>
Schedule F: Loan Repayments total (Attach Schedule F)	<u> </u>
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$ <u>1,305.55</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D).....	\$ <u> </u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ <u> </u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....	\$ <u>650.00</u>
CANDIDATE COMMITTEES ONLY:	
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ <u> </u>

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

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

Friends of Jim Lykam

A (Rev. 06/97)	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/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
10/15/04	ID# 6432 CK# 1209	Plumbers & Pipefitters Local 25 Iowa State PAC 4600 - 46th Ave. Rock Island, Ill 61201		\$100.00	
10/15/04	ID# CK#	Connie-Mohr-Wright 1520 - 29th St. Moline, Ill 61265		25.00	
10/15/04	ID# 8036 CK# 2482	Electrical Workers Local Union 145 1700 - 52nd Ave. 071, A Moline, Ill 61265		200.00	
10/15/04	ID# 6082 CK# 1048	MidAmerican Energy Co. Effective Government Committee 666 Grand Ave. P.O. Box 657 Des Moines, Ia 50303-0657		200.00	
10/15/04	ID# 6291 CK# 2340	IHA PAC 100 E. Grand Suite 100 Des Moines, Ia 50309		250.00	
10/16/04	ID# 9672 CK# 1108	Plumbers & Pipefitters Local 125 1839 - 16th Ave. SW Cedar Rapids, Ia 52404-1755		500.00	
10/20/04	ID# CK#	David Macias 412 Colony Dr. Davenport, Ia 52806		100.00	
10/20/04	ID# CK#	Neal Griffith Jr. 3365 Lundy Lane Bettendorf, Ia 52722		100.00	
10/21/04	ID# CK#	Alta Price 4888 School House Rd. Bettendorf, Ia 52722		100.00	
10/21/04	ID# 6445 CK# 1211	River PAC 329 - 43rd St. Des Moines, Ia 50312-2531		100.00	
SUB-TOTAL				\$1675.00	
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) (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.

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

A (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Friends of Jim Lykam

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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
10/25/04	ID# 6323 CK# 2922	Master Builders of Iowa 221 Park St. P.O. Box 695 Des Moines, Ia 50303		\$250.00	
10/25/04	ID# 6059 CK# 2655	Iowa Committee of Automotive Retailers 1111 office Park Rd. West Des Moines, Ia 50265		500.00	
10/25/04	ID# 9663 CK# 615	Citizens for Preservation of Racing 1 Prairie Meadows Dr. Altoona, Ia 50009		500.00	
	ID# CK#				

SUB-TOTAL \$1250.00

TOTAL (if last page of this schedule) \$2925.00

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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
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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.

CHECK THIS BOX IF AMENDING FORM

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

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
10/15/04	ID# CK# 1228	Postmaster 4018 Marquette Davenport, Ia 52806	Mail Campaign reports	\$5.11
10/15/04	ID# CK# 1229	Jim Lykam 2906 W. 35th St. Davenport, Ia 52806	Reimbursement for copies, stickers, postage to mail photos, copy paper, photos.	42.75
10/16/04	ID# CK# 1230	Postmaster 2200 W. Kimberly Rd. Davenport, Ia 52806	Stamps	103.50
10/16/04	ID# CK# 1231	Carter Printing 1739 East Grand Ave. Des Moines, Ia 50316	postcards	1,226.42
10/18/04	ID# CK# 1232	Q.C.D.M. 5333 Avenue of Cities Moline, Ill. 61265	Mailing	50.00
10/18/04	ID# CK# 1233	Postmaster 7700 68th St. Milan, Ill 61264	postage	62.16
10/18/04	ID# CK# 1234	Mail Services 4100 121st St. Urbandale, Ia 50323	Mailing	2200.00
10/19/04	ID# CK# 1235	Postmaster 933 W. 2nd Davenport, Ia 52801	Stamps	9.43
SUB-TOTAL				\$3,699.37
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 56.6(3)(1).)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 09/97)	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)

Friends of Jim Lykam

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
10/19/04	ID# CK# 1236	River Cities Reader 532 W. 3rd St. Davenport, Ia 52801	Ad in paper	\$129.00
10/19/04	ID# CK# 1237	Catholic Messenger 736 Federal St. Davenport, Ia 52805	Ad in paper	128.10
10/19/04	ID# CK# 1238	Dispatch 1720 Fifth Ave. Moline, Ill 61265	Ad in paper	264.60
10/21/04	ID# CK# 1239	Mail Services 4100 121 st. Urbandale, Ia 50323	Mailing	4,330.33
10/25/04	ID# CK# wire transfer	The Clinton Group, Inc 1350 Connecticut Ave. NW Suite 1102 Washington, DC 20036	VOTER ID	1,863.00
10/26/04	ID# CK# 1240	Postmaster 4018 Marquette Davenport, Ia 52806	Stamps	2.30
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$6,717.33
TOTAL (if last page of this schedule) \$10,416.70

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 56.6(3)(i).)

SCHEDULE F (Rev. 08/96)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
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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
10/25/04	Jim Lykam 2906 W. 35th St. Davenport, Ia 52806	Self	\$ 650.00

TOTAL (PART I) \$ 650.00

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
			\$

TOTAL CASH REPAYMENTS (PART II) \$
 From Schedule E -- TOTAL LOANS FORGIVEN \$
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 650.00

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