

**FORM DR-2: Disclosure Summary Page**

Status: **Amended**

ID #: **851**

Committee: **Iowans for Van Fossen**

Comm Type: **State House**

Date Due: **10/29/2004**

Report Year: **2004**

Treasurer: **Randy L Linn**

**Primary Ph. (563)340-0528 Secondary Ph. (563)355-5330**

Chair:

County: **NA**

Amended: **5/15/2006**

Statutory Due Date	10/29/2004
Adjusted Due Date	/ /
Received Date	10/29/2004
Postmark Date	/ /
Amended	05/15/2006

**Statement of Cash on Hand**

Cash on Hand at Start of Period	<b>\$13,967.37</b>
Schedule A: Cash contributions Total	<b>\$8,910.00</b>
Schedule F: Loans Received Total	<b>\$0.00</b>
Schedule H: Campaign Property Sales	<b>\$0.00</b>
<b>SUB-TOTAL</b>	<b>\$22,877.37</b>
Schedule B: Expenditure Total	<b>\$19,602.54</b>
Schedule F: Cash Loan Repayments	
Cash on Hand At End of Period	<b>3,274.83</b>

**Additional Assets and Liabilities**

Loans in Place at Start of Period	<b>\$0.00</b>
Schedule D: UnPaid Bills	<b>\$0.00</b>
Schedule E: In-Kind Contributions	<b>\$0.00</b>
Schedule F: Forgiven Loans	
Schedule F: Outstanding Loans	<b>\$0.00</b>
Schedule G: Consultant Breakdown?	<b>No</b>
Schedule H: Campaign Property Value	<b>\$2,100.00</b>

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Amended: **5/15/2006**

Statutory Due Date	10/29/2004
Adjusted Due Date	/ /
Received Date	10/29/2004
Postmark Date	/ /
Amended	05/15/2006

*Summary page created by auditor to update balances*

**Statement of Cash on Hand**

Cash on Hand at Start of Period	<b>\$13,467.37</b>
Schedule A: Cash contributions Total	<b>\$8,910.00</b>
Schedule F: Loans Received Total	<b>\$0.00</b>
Schedule H: Campaign Property Sales	<b>\$0.00</b>
<b>SUB-TOTAL</b>	<b>\$22,377.37</b>
Schedule B: Expenditure Total	<b>\$19,602.54</b>
Schedule F: Cash Loan Repayments	
Cash on Hand At End of Period	<b>2,774.83</b>

**Additional Assets and Liabilities**

Loans in Place at Start of Period	<b>\$0.00</b>
Schedule D: UnPaid Bills	<b>\$0.00</b>
Schedule E: In-Kind Contributions	<b>\$0.00</b>
Schedule F: Forgiven Loans	
Schedule F: Outstanding Loans	<b>\$0.00</b>
Schedule G: Consultant Breakdown?	<b>No</b>
Schedule H: Campaign Property Value	<b>\$2,100.00</b>

## DISCLOSURE SUMMARY PAGE

<b>FORM DR-2</b> (Rev. 02/96)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # <u>851</u>	
Indexed _____	
Audited _____	
Computer <u>WKS</u>	

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

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**IMPORTANT:** Indicate type of committee you are reporting for:  (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

SIGNATURE OF TREASURER (of person filing this report) [Signature] TELEPHONE 563-355-5330 DATE SIGNED 7-28-05

**Penalties Due For Late Filed Reports Range from \$10 to \$400**

**SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**

I AM FILING A 10-29-04 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate one

CHECK IF AMENDMENT TO REPORT DATED 10-29-04

Local Committees, enter Date of Election _____
County & Local Committees, enter County in which Election is held _____

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

### 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.) \$ 13,197.97 14,847.97

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) 8,910.00

Schedule C: Fund-raising Events total (Attach Schedule C) \_\_\_\_\_

Schedule F: Loans Received total (Attach Schedule F) \_\_\_\_\_

Schedule H: Total Sales of Campaign Property (Attach Schedule H) \_\_\_\_\_

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL.....\$** 23,757.97

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) 19,602.54

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) \$ 2,155.43 4,155.43

UNPAID BILLS (From Schedule D - Attach Schedule D) \_\_\_\_\_ \$

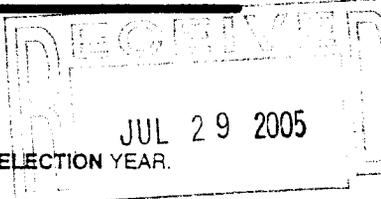
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \_\_\_\_\_ \$

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \_\_\_\_\_ \$

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?) \_\_\_\_\_ YES  NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ 2,100.00 2,300.00



For Instructions, See Back of Form

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

COMMITTEE NAME (Must be same as on Statement of Organization)  
*Iowans For Vin Foxx*

JUL 29 2005

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
10/21/04	ID# CK# 5160	PAS PAC 2600 E. 8th St Boon, Ia 50036	n/a	\$100.00	<input type="checkbox"/>
10/22/04	ID# CK# 5511	Mike O'day 20321-250th St. Eldridge, Ia 52748	n/a	100.00	<input checked="" type="checkbox"/>
10/22/04	ID# CK# 4437	Ben Mangan PO Box 3824 Davenport, Ia 52808	n/a	100.00	<input checked="" type="checkbox"/>
10/22/04	ID# CK# 773	Mark Miller 1315 E. 11th St Davenport, Ia 52803	n/a	100.00	<input checked="" type="checkbox"/>
10/26/04	ID# CK# 1094	Coraline Ruhl 233 Fernwood Ave Davenport, Ia 52803	n/a	100.00	<input checked="" type="checkbox"/>
10/26/04	ID# CK# 5947	Michael Thoma 21801 Great River Rd LeClaire, Ia 52753	n/a	50.00	<input checked="" type="checkbox"/>
10/26/04	ID# CK# 2297	Scott Alpen 2345 Crumwell cir Davenport, Ia 52807	n/a	100.00	<input checked="" type="checkbox"/>
10/26/04	ID# 6430 CK# 1300	Iowa Rural Water State PAC 4221 S. 22nd Ave E Newton, Ia 50508	n/a	250.00	<input type="checkbox"/>
10/26/04	ID# CK# 2911	Master Builders of IA PAC 221 Park St PO Box 695 Des Moines, Ia 50303	n/a	500.00	<input type="checkbox"/>
10/26/04	ID# CK#			1025.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2025.00	
TOTAL (if last page of this schedule)				\$ 890.00	

\* 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.

<b>IAETHICS</b> <b>DISCLOSURE BOARD</b> OCT 29 2004 FILED fax	FORM <b>DR-2</b> (Rev. 02/96)	DISCLOSURE REPORT
	For Office Use Only Comm. # <u>851</u> Indexed <u>T</u> Audited <u>WRS 5-26-05</u> Computer <u>SW</u>	

**DISCLOSURE SUMMARY PAGE**

COMMITTEE NAME (Must be same as on Statement of Organization) Township For Van Fossen

James R

IMPORTANT: Indicate type of committee you are reporting for:

( 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 State of Candidates

SIGNATURE OF TREASURER (or person filing this report) [Signature] TELEPHONE 563-355-8330 DATE SIGNED 10-25-04

**Penalties Due For Late Filed Reports Range from \$10 to \$400**

**SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**

I AM FILING AN October 29, 2004 REPORT FOR AN/A (1) ELECTION (2) NON-ELECTION YEAR.  
 (report date) Indicate one

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 Notice of Dissolution 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. (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.) ..... \$ 13,957.85

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) ..... 8,285.00

Schedule C: Fund-raising Events total (Attach Schedule C) .....

Schedule F: Loans Received total (Attach Schedule F) .....

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

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 22,282.85

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) ..... 19,602.54

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) ..... \$ 2,680.31

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

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) ..... \$ \_\_\_\_\_

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) ..... \$ \_\_\_\_\_

**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?) \_\_\_\_\_ YES  NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) s/B 2100.00 \$ 2,300.02

# DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 02/96)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. #	<u>851</u>
Indexed	
Audited	<i>[Signature]</i>
Computer	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
TOWANS FOR VAN FOSSEN

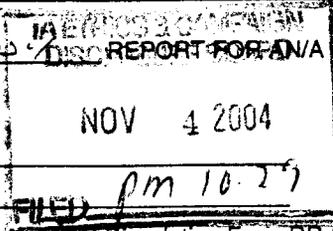
**IMPORTANT:** Indicate type of committee you are reporting for:  (1) Statewide Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates

SIGNATURE OF TREASURER (or person filing this report) *[Signature]* TELEPHONE 563-355-5330 DATE SIGNED 10-29-04

**Penalties Due For Late Filed Reports Range from \$10 to \$400**

**SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:**

I AM FILING AN October 29, 2004 **DISC REPORT FOR AN/A** (1) ELECTION (2) NON-ELECTION YEAR.  
(report date) Indicate one



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 Notice of Dissolution is filed.)

Local Committees, enter Date of Election \_\_\_\_\_

County & Local Committees, enter County in which Election is held \_\_\_\_\_

## STATEMENT OF CASH ON HAND

<b>CASH ON HAND</b> at the beginning of the reporting period. (This is the total of all monies 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 must be zero if this is first report filed.)	\$	<u>13,957.85</u>
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>		
Schedule A: Cash Contributions total (Attach Schedule A)		<u>8,285.00</u>
Schedule C: Fund-raising Events total (Attach Schedule C)		
Schedule F: Loans Received total (Attach Schedule F)		
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		
<b>(Schedule H applies to Candidates' Committees Only)</b>		
<b>SUB-TOTAL</b> .....	\$	<u>22,282.85</u>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>		
Schedule B: Expenditures total (Attach Schedule B)		<u>19,602.54</u>
Schedule F: Loan Repayments total (Attach Schedule F)		
<b>CASH ON HAND</b> at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	\$	<u>2,680.31</u>
<b>UNPAID BILLS</b> (From Schedule D - Attach Schedule D)	\$	
<b>IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E)	\$	
<b>OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F)	\$	
<b>CANDIDATE COMMITTEES ONLY:</b>		
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)		<u>YES</u> <input checked="" type="checkbox"/> <u>NO</u>
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$	<u>2,300.02</u>

For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (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)  
Iowans for Van Fossen

**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# CK# 4362	Ken Conlon 4205 Spring St. Davenport, IA	n/a	\$35.00	<input checked="" type="checkbox"/>
10/15/04	ID# CK# 1672	Greg Crawford 3439 Hillandale Rd. Davenport, IA	n/a	35.00	<input checked="" type="checkbox"/>
10/15/04	ID# CK# 10994	Catherine Paaske 20588 Brady St. Davenport, IA	n/a	35.00	<input checked="" type="checkbox"/>
10/15/04	ID# CK# 0699	James Von Maur 6565 Brady St. Davenport, IA	n/a	50.00	<input checked="" type="checkbox"/>
10/15/04	ID# CK# 9187	Robert Shaw 2112 E.32 St. Ct. Davenport, IA	n/a	100.00	<input checked="" type="checkbox"/>
10/15/04	ID# CK# 1051	Susan Frazer 28125 225 St. LeClaire, IA	n/a	100.00	<input checked="" type="checkbox"/>
10/15/04	ID# CK# 2221	Dave Millage 3910 Aspen Hills Dr. Bettendorf, IA	n/a	100.00	<input checked="" type="checkbox"/>
10/15/04	ID# CK# 2012	Roger Amhof 18210 230 St. Davenport, IA	n/a	100.00	<input checked="" type="checkbox"/>
✓ 10/15/04	ID# 6082 CK# 1044	MidAmerican Energy Eff. Gov. Comm PO Box 657 Des Moines, IA	n/a	500.00	<input checked="" type="checkbox"/>
✓ 10/15/04	ID# 6096 CK# 1843	Manufactured Housing PAC 1400 Dean Av. Des Moines, IA	n/a	500.00	<input checked="" type="checkbox"/>

SUB-TOTAL  
\$ 1,555.00  
TOTAL (if last page of this schedule)  
\$

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For Instructions, See Back of Form.



<b>SCHEDULE A</b> (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)

Iowans For Van Fossen

**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
10/18/04	ID# CK# 4303	Carter LeBeau 26 Oak Lane Davenport, IA	n/a	\$15.00	<input checked="" type="checkbox"/>
10/18/04	ID# CK# 10001	Bill Wallace 665 Mississippi Blvd Bettendorf, IA	n/a	100.00	<input checked="" type="checkbox"/>
10/18/04	ID# CK# 4781	Corey Schultz 4318 Winding Hill Davenport, IA	n/a	50.00	<input checked="" type="checkbox"/>
10/18/04	ID# CK# 5188	Eugene Holst 5655 Dodds Drive Bettendorf, IA 52722	n/a	\$35.00	<input checked="" type="checkbox"/>
10/18/04	ID# CK# 1298	Mike Bauer 2923 E 18th St Davenport, Iowa 52803	n/a	100.00	<input checked="" type="checkbox"/>
10/18/04	ID# CK# 5369	Joseph Lohmuller 301 Crestiline Drive Davenport, Iowa 52803	n/a	100.00	<input checked="" type="checkbox"/>
10/18/04	ID# CK# 5629	John Bush 5401 Victoria Ave Davenport, Iowa 52807	n/a	35.00	<input checked="" type="checkbox"/>
10/18/04	ID# 6282 CK# 001458	Hy-Vee, Inc. Employees PAC 5820 Westown Parkway West Des Moines, Ia 50266-8223	n/a	200.00	<input type="checkbox"/>
10/21/04	ID# CK# 4920	Wayne Wagner 5296 Coachman Rd Bettendorf, IA 52722	n/a	50.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 1820	Maggie Tinsman 2865 Hichory Hill Ln Bettendorf, Ia 52722	n/a/	35.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 720.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of For.

Reset Form

SCHEDULE <b>A</b> (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)  
Towans for Van Fossen

**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
10/21/04	ID# CK# 4264	Kenneth Tank 24300 85th Ave Walcott, Ia 52773	n/a	\$25.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 8995	Rosemarie Megraw 1006 Grand Ct Davenport, Ia 52803	n/a	25.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 10097	Dr. Larry Barrett 1104 Kimberly Rd Bettendorf, Ia 52722	n/a	40.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 2079	Nancy Jandt 4402 Lorton Ave Davenport, Ia 52806	n/a	35.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 6585	KJ McKinney 11615 287th St Donahue, Ia 52746	n/a	35.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 7560	Steve Morency 1118 Sycamore Dr Leclair, Ia 52753	n/a	100.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 4517	Nidal Harb 7000 Jersey Ridge Rd Davenport, Ia 52807	n/a	100.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 2991	Tara Elias 509 E. 30th St Davenport, Ia 52803	n/a	100.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 3650	Paul Lensmeyer 3070 Hartford Dr Bettendorf, Ia 52722	n/a	100.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 1875	Marc Anderson 4854 Norfolk Pl Bettendorf, Ia 52722	n/a	100.00	<input checked="" type="checkbox"/>

SUB-TOTAL

\$ 660.00  
\$

**TOTAL (if last page of this schedule)**

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For Instructions, See Back of Form.

Reset Form

SCHEDULE <b>A</b> (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)

IOWANS FOR VAN FOSSEN

**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
10/21/04	ID# CK# 7913	Tom Bush 4124 Glendale Blvd Davenport, Ia 52807	n/a	\$100.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 3257	Scott Van Vooren 2738 Elm St Davenport, Ia 52803	n/a	100.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 1042	Linda Miller 6766 Ridges Ct Bettendorf, Ia 52722	n/a	100.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 3123	Mark Vieregg 4661 E. 49th Ct Davenport, Ia 52807	n/a	100.00	<input checked="" type="checkbox"/>
10/21/04	ID# 6125 CK# 002415	Iowa Realtors PAC 1370 NW 114th st Suite 100 Clive, Ia 50325	n/a	2,000.00	<input type="checkbox"/>
10/21/04	ID# 6034 CK# 110	Engineer's Political Action Committee 1000 Walnut St Ste 102 Des Moines, Ia 50309-3433	n/a	300.00	<input type="checkbox"/>
10/21/04	ID# 8429 CK# 2531	PCIPAC 2600 South River Road Des Plaines, Il 60018-3286	n/a	100.00	<input type="checkbox"/>
10/21/04	ID# CK# 5270	Quad-City Pulmonary Consultant 2035 Bridge Ave Suite 202 Davenport, Ia 52803	n/a	100.00	<input checked="" type="checkbox"/>
10/21/04	ID# CK# 694	Steve Landauer 201 W. 2nd St Suite 601 Davenport, Ia 52801	n/a	50.00	<input checked="" type="checkbox"/>
10/21/04	ID# 6056 CK# 3380	Bankers Unite In Leg Decisions Ia Bankers Ass 8800 Nw 62 Ave Johnston, Ia 50131	n/a	1000.00	<input type="checkbox"/>

SUB-TOTAL

\$3950.00

\$

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

SCHEDULE <b>A</b> (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)

*Jowans For Vanfossen*

**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
<i>USK</i> <i>OTC</i> 10/21/04	ID# 8338 CK# 5160	PAS PAC <i>FAS PAC</i> 2600 E. 8th St Boon, Ia 50036	n/a	\$100.00	<input type="checkbox"/>
10/22/04	ID# CK# 5511	Mike O'day 20321-250th St. Eldridge, Ia 52748	n/a	100.00	<input checked="" type="checkbox"/>
10/22/04	ID# CK# 4437	Ben Mangan PO Box 3824 Davenport, Ia 52808	n/a	100.00	<input checked="" type="checkbox"/>
10/22/04	ID# CK# 773	Mark Miller 1315 E. 11th St Davenport, Ia 52803	n/a	100.00	<input checked="" type="checkbox"/>
10/26/04	ID# CK# 1094	Coraline Ruhl 233 Fernwood Ave Davenport, Ia 52803	n/a	100.00	<input checked="" type="checkbox"/>
10/26/04	ID# CK# 5947	Michael Thoma 21801 Great River Rd LeClaire, Ia 52753	n/a	50.00	<input checked="" type="checkbox"/>
10/26/04	ID# CK# 2297	Scott Alpen 2345 Crumwell cir Davenport, Ia 52807	n/a	100.00	<input checked="" type="checkbox"/>
<i>✓</i> 10/26/04	ID# 6430 CK# 1300	Iowa Rural Water State PAC 4221 S. 22nd Ave E Newton, Ia 50508	n/a	250.00	<input type="checkbox"/>
<i>✓</i> 10/26/04	ID# 6323 CK# 2911	Master Builders of IA PAC 221 Park St PO Box 695 Des Moines, Ia 50303	n/a	500.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$1,400.00	
<b>TOTAL (if last page of this schedule)</b>				\$8,285.00	

\* 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.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

**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)  
Iowans for Van Fossen

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#	US Bank 201 W. 2 St. Davenport, IA	Service Charge	\$ 5.50
10/15/04	ID# CK#1798	DavenportOne 130 W. 2 St. Davenport, IA	Chamber Breakfast	12.00
10/22/04	ID# CK#1810	Republican Party of Iowa 621 E 9 St Des Moines, IA 50309	Contribution	10,000.00
10/22/04	ID# CK#1808	Republican Party of Iowa 621 E 9 St Des Moines, IA 50309	Contribution	3,000.00
10/22/04	ID# CK#1811	Republican Party of Iowa 621 E 9 St Des Moines, IA 50309	Contribution	2,500.00
10/22/04	ID# CK# Debit card	Radisson Hotel 111 E. 2 St. Davenport, IA	Fundraiser Breakfast, Room rental, A/V equipment.	1539.52
10/25/04	ID# CK# Debit card	Qwest Communications PO Box 2619 Omaha, NE	Phone, Internet, Fax	214.11
10/26/04	ID# CK# 1813	Victory Enterprises 5200 SW 30th St Davenport, IA 52802	Radio Buy: WOC, KCQQ, KUUL	2112.00
SUB-TOTAL				\$ 19,383.13
<b>TOTAL (if last page of this schedule)</b>				\$

**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

**Reset Form**

**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)

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
10/26/04	ID# CK# Debit card	Staple's 5245 Elmore Ave Davenport, IA	Case Printer paper, file folders, ink.	\$ 219.41
	ID# CK#			
SUB-TOTAL				\$ 219.41
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 19,602.54</b>

**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).)

**THIS FORM IS USED BY CANDIDATES' COMMITTEES ONLY**

SCHEDULE  
**H**  
(Rev. 02/96) CAMPAIGN  
PROPERTY

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

TOWANS FOR VAN FOSSEN

ATTACH SCHEDULE H TO EACH REPORT, MAKING CHANGES AS REQUIRED.

CHECK THIS BOX IF AMENDING FORM

**PART I - ONGOING INVENTORY OF CAMPAIGN PROPERTY**

**PART II - SALES OR TRANSFERS OF CAMPAIGN PROPERTY \*\***

Date Purchased (Schedule B) or Date Received (Schedule E) (MM/DD/YR)	Description of Property	Purchase Price or Est. Value When Acquired*	Current Value at Fair Market This Report
4-7-02 <del>1-20-98</del>	Computer.	1,746	500
S/B 0- 12-1-03	Digital Camera.	267.49	50
S/B 0 - 10-16-03	Digital Recorder	174.99	50
10-5-04	Laptop Computer	1,698.98	1,600.
S/B 0 - 10-7-04	Digital Video Camera	109.99	100.00

Date (MM/DD/YR)	Name and Address of Purchaser/Donee	Description of Property	Sold? Y/N	Sale Price	Value of Donation

TOTAL VALUE CAMPAIGN PROPERTY THIS REPORT (TRANSFER TO SUMMARY PAGE) \$ 2,300.00

If estimated, show est. beside figure. S/B 2100.00

\*\* PROPERTY SALES & TRANSFERS TOTAL (TRANSFER TO SUMMARY PAGE) \$ \_\_\_\_\_

TOTALS \$ \_\_\_\_\_ \$ \_\_\_\_\_

(Attach Additional Schedules if Needed)

Page 1 of 1 Pages (For Schedule H)