

**DISCLOSURE SUMMARY PAGE**

**Reset Form**

<b>FORM DR-2</b> (Rev. 12/2005)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	5114
Logged in	SW
Scanned	
Computer	
Audited	

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

COMMITTEE TO ELECT MICHAEL A. MAURO

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**IMPORTANT:** Indicate by # type of committee you are reporting for:  1  
 ( 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 MICHAEL A. MAURO	Political Party (if applicable) DEMOCRAT
Office Sought SECRETARY OF STATE	District (if Senate or House)

JAN 18 2006  
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Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson/ for any other type of committee, is the individual responsible for filing timely and accurate reports.

*Janula K. Conner* \_\_\_\_\_ 515-266-6895 1-17-06  
**SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED**

I AM FILING A JANUARY 19, 2006 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
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. (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 must be zero if this is first report filed.) .....	\$ 21,568.42
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....	67,916.40
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>	<b>\$ 89,484.82</b>
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) .....	9,771.81
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).....	<b>\$ 79,713.01</b>

<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D).....	\$ _____
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	\$ 100.00
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F).....	\$ _____

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

**CANDIDATE COMMITTEES ONLY:**  
**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) \$ \_\_\_\_\_

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

For Instructions, See Back of Form

Reset Form

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
COMMITTEE TO ELECT MICHAEL A. MAURO

**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 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	✓ F R. IN
12-23-05	ID# CK#	KAY RILEY 2910 CAYUGA PT DM, IA 50321		\$100.00	<input checked="" type="checkbox"/>
12-28-05	ID# CK#	KATIE HOLSCHUH 12613 W BRNADYWINE DR SUN CITY WEST, AZ 85375		100.00	<input type="checkbox"/>
12-30-05	ID# CK#	RUSH NIGUT 5010 WOODLAND AVE DM, IA 503212		100.00	<input type="checkbox"/>
12-30-05	ID# CK#	JERRY CRAWFORD 1701 RUAN CENTER DM, IA 50309		2500.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 2800.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 67,916.40	

\* 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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**Reset Form**

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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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12-21-05	ID# CK#	KENT DECKER 5850 MCKINLEY AVE DM, IA 50321		\$50.00	<input type="checkbox"/>
12-21-05	ID# CK#	JOSEPH LAKERS 3667 GRAND AVE UNIT 14 DM, IA 50312		100.00	<input type="checkbox"/>
12-22-05	ID# CK#	MARLO GILLOTTI 1129 BURR OAKS DR WDM, IA 50266		100.00	<input type="checkbox"/>
12-22-05	ID# CK#	DUSKY TERRY 3399 192ND ST DEXTER, IA 50070		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 350.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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(Including candidate's personal funds)

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12-19-05	ID# CK#	RICK WANAMAKER 9751 LINCOLN AVE CLIVE, IA 5032		\$50.00	<input type="checkbox"/>
12-19-05	ID# CK#	DENIS & LINDA FRANZEN PO BOX 218 ALTOONA, IA 50009		1000.00	<input type="checkbox"/>
12-19-05	ID# CK#	DAN HUSER 213 7TH ST NW ALTOONA, IA 50009		1000.00	<input type="checkbox"/>
12-19-05	ID# CK#	GERI HUSER 213 7TH ST NW ALTOONA, IA 50009		1000.00	<input type="checkbox"/>
12-19-05	ID# CK#	BILL PETERS 1900 1/2 MCKINLEY AVE DES MOINES, IA 50316		1000.00	<input type="checkbox"/>
12-19-05	ID# CK#	KURT RASMUSSEN PO BOX 3365 DES MOINES, IA 50316		1000.00	<input type="checkbox"/>
12-19-05	ID# CK#	CHAILLE SKINNER 810 ANDREWS DR PLEASANT HILL, IA 50327		1000.00	<input type="checkbox"/>
12-19-05	ID# CK#	ED SKINNER PO BOX 367 ALTOONA, IA 50009		1000.00	<input type="checkbox"/>
12-19-05	ID# CK#	LOIS SKINNER PO BOX 367 ALTOONA, IA 50009		1000.00	<input type="checkbox"/>
12-19-05	ID# CK#	R. BRADLEY SKINNER 810 ANDREWS DR PLEASANT HILL, IA 50327		1000.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 9050.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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(Including candidate's personal funds)

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12-08-05	ID# CK#	MAKR WANDRO 8128 WILDEN DR URBANDALE, IA 50322		\$500.00	<input type="checkbox"/>
12-14-05	ID# CK#	LORAN F. PARKER 686 - 63RD ST DM, IA 50312		50.00	<input type="checkbox"/>
12-14-05	ID# CK#	MARGARET BORGEN 2504 FOREST DR DM, IA 50312		100.00	<input type="checkbox"/>
12-14-05	ID# CK#	JEFFREY A. DUNN 15418 AIRLINE AVE DM, IA 50323		200.00	<input type="checkbox"/>
12-14-05	ID# CK#	PHIL MILLER 808 ASHWORTH RD WDM, IA 50265		200.00	<input type="checkbox"/>
12-14-05	ID# CK#	BRENDA R. OLSON 2635 HUBBELL AVE DM, IA 50317		200.00	<input type="checkbox"/>
12-14-05	ID# CK#	WILLIAM J. GANNON 205 BLUFF ST MINGO, IA 50168		200.00	<input type="checkbox"/>
12-14-05	ID# CK#	JERRY WATTERS 3001 N JEFFERSON INDIANOLA, IA 50125		300.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1750.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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12-05-05	ID# CK#	ROBERT B. DEANGELIS 3812 SW 32ND ST DM, IA 50321		\$50.00	<input type="checkbox"/>
12-05-05	ID# CK#	THOMAS D. ROSS 7 - 35TH ST. DM, IA 50312		250.00	<input type="checkbox"/>
12-05-05	ID# CK#	CONNIE RANDA 3029 WOLCOTT AVE DM, IA 50321		250.00	<input type="checkbox"/>
12-06-05	ID# CK#	STEVEN WANDRO 2501 GRAND AVE SUITE B DM, IA 50312		500.00	<input type="checkbox"/>
12-06-06	ID# CK#	WEST BANK PO BOX 65020 WDM, IA 50265		12.19	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1062.19	
<b>TOTAL (if last page of this schedule)</b>				\$	

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11-22-05	ID# CK#	MIDWEST AUTOMATIC FIRE SPRINKLER CO 1823 RACCOON ST DM, IA 50317		\$200.00	<input type="checkbox"/>
11-22-05	ID# 5114 CK# 2975	MASTER BUILDERS OF IOWA PAC 221 PARK ST DM, IA 50303		2045.00	<input type="checkbox"/>
11-22-05	ID# CK#	RON PARKER 1044 - 44TH ST. DM, IA 50311		50.00	<input type="checkbox"/>
11-26-05	ID# CK#	JOYCE LETO 3115 SW 39TH ST. DM, IA 50321		50.00	<input type="checkbox"/>
11-26-05	ID# CK#	KAREN SMITH 3244 E INDIANAPOLIS AVE DM, IA 50317		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 2445.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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(Including candidate's personal funds)

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11-22-05	ID# CK#	LEON SHEARER 421 SILVERADO TRL WAUKEE, IA 50263		\$200.00	<input type="checkbox"/>
11-22-05	ID# CK#	MARSHALL G. LINN III 3736 JOHN LYNDE RD DM, IA 50312		200.00	<input type="checkbox"/>
11-22-05	ID# CK#	KYLE Q. MCQUISTON 3911 WOODLAND AVE. APT A7 WDM, IA 50266		200.00	<input type="checkbox"/>
11-22-05	ID# CK#	CHARLES B. FOLLETT 5870 BEECHTREE DR WDM, IA 50266		200.00	<input type="checkbox"/>
11-22-05	ID# CK#	MICHAEL. A. TOUSLEY 421 S 49TH ST WDM, IA 50265		200.00	<input type="checkbox"/>
11-22-05	ID# CK#	MICHAEL K. VESEY 208 WEST HILLCREST DR INDIANOLA, IA 50125		200.00	<input type="checkbox"/>
11-22-05	ID# CK#	CRAIG T. FABER 1713 THORNWOOD RD WDM, IA 50265		200.00	<input type="checkbox"/>
11-22-05	ID# CK#	RICHARD C. FELICE 3101 SW 32ND PL DM, IA 50321		200.00	<input type="checkbox"/>
11-22-05	ID# CK#	MICHAEL A. CUNNINGHAM 13450 CEDARWOOD AVE CLIVE, IA 50325		200.00	<input type="checkbox"/>
11-22-05	ID# CK#	SHAUN M. O'TOOL 2104 SYCAMORE ST GRANGER, IA 50109		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2000.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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11-22-05	ID# CK#	JANE ROHR 2110 75TH ST. DM, IA 50322		\$25.00	<input type="checkbox"/>
11-22-05	ID# CK#	GEORGE T. INMAN III 530 IOWA ST ST CHARLES, IA 50240		25.00	<input type="checkbox"/>
11-22-05	ID# CK#	JEAN I CLASSON 3635 E. 43RD CT DM, IA 50317		40.00	<input type="checkbox"/>
11-22-05	ID# CK#	MARK KENNEDY 1428 GERMANIA DR DM, IA 50311		70.00	<input type="checkbox"/>
11-22-05	ID# CK#	JAMES JOHNSON 3228 SKYLINE DR DM IA 50310		70.00	<input type="checkbox"/>
11-22-05	ID# CK#	MARK J. HASEK 1313 - 7TH AVE. SE ALTOONA, IA 50009		100.00	<input type="checkbox"/>
11-22-05	ID# CK#	JOHN S. STROUD 4069 -113TH AVE NORWALK, IA 50211		100.00	<input type="checkbox"/>
11-22-05	ID# CK#	STEVE FERGUSON 12640 NW 85TH AVE GRIMES, IA 50111		100.00	<input type="checkbox"/>
11-22-05	ID# CK#	JACK COPIC 617 VALLEY WEST DR WDM, IA 50265		100.00	<input type="checkbox"/>
11-22-05	ID# CK#	STEVEN HAUSCHILT 1316 7TH AVE SE ALTOONA, IA 50009		125.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 755.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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11-22-05	ID# CK#	LISA MARGULIES 3863 TIMBERLINE DR WDM, IA 50265		\$1000.00	<input type="checkbox"/>
11-22-05	ID# CK#	BRENDA JOHNSON 3870 TIMBERLINE DR WDM, IA 50265		1000.00	<input type="checkbox"/>
11-22-05	ID# CK#	DAVID HANSEN 14414 WILDEN CIRCLE URBANDALE, IA 50322		1000.00	<input type="checkbox"/>
11-22-05	ID# CK#	JANET HANSEN 14414 WILDEN CIRCLE URBANDALE, IA 50322		1000.00	<input type="checkbox"/>
11-22-05	ID# CK#	ELAINE JOHNSON 2504 JORDAN GROVE WDM, IA 50265		1000.00	<input type="checkbox"/>
11-22-05	ID# CK#	JARED JOHNSON 12035 UNIVERSITY AVE SUITE 101 CLIVE, IA 50325		1000.00	<input type="checkbox"/>
11-22-05	ID# CK#	KEVIN J. JOHNSON 12035 UNIVERSITY AVE SUITE 100 CLIVE, IA 50325		1000.00	<input type="checkbox"/>
11-22-05	ID# CK#	RICHARD B. MARGULIES 2100 WESTOWN PARKWAY SUITE 220 WDM, IA 50266		1000.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 8000.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

**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
11-17-05	ID# CK#	CARL WIEDERAENDERS 683 32ND ST DM, IA 50312		\$100.00	<input type="checkbox"/>
11-18-05	ID# CK#	JOE KELLY 2206 40TH PL DM, IA 50310		100.00	<input type="checkbox"/>
11-18-05	ID# CK#	JEAN HAUGLAND 6750 SCHOOL ST UNIT 1402 DM, IA 50311		100.00	<input type="checkbox"/>
11-21-05	ID# CK#	CECELIA KIRVIN 3616 - 80TH ST URBANDALE, IA 50322		50.00	<input type="checkbox"/>
11-21-05	ID# CK#	MAXINE WILLITS 4147 BRIARCLIFF DR DM, IA 50317		100.00	<input type="checkbox"/>
11-21-05	ID# CK#	PAMELA CONNER 2715 E 40TH ST DM, IA 50317		200.00	<input type="checkbox"/>
11-22-05	ID# CK#	LESLIE BABICH 1115 16TH ST. WDM, IA 50265		100.00	<input type="checkbox"/>
11-22-05	ID# CK#	DAVID GOLDMAN 100 COURT AVE SUITE 403 DM, IA 50309		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 850.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
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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
11-04-05	ID# CK#	TOM SLAUGHTER 120 35TH ST. DM, IA 50312		\$100.00	<input type="checkbox"/>
11-04-05	ID# CK#	JAMES W. HUBBELL III 3022 FOX RUN DM, IA 50321		250.00	<input type="checkbox"/>
11-04-05	ID# CK#	DON MAURO 1629 E VIRGINIA AVE DM, IA 53020	Brother	500.00	<input type="checkbox"/>
11-07-05	ID# CK#	MARGUERITE MCNABB 1232 WISCONSIN AVE AMES, IA 50010		50.00	<input type="checkbox"/>
11-07-05	ID# CK#	TOM ANDREWS 2816 SUMMIT VISTA DR DM, IA 50321		25.00	<input type="checkbox"/>
11-07-05	ID# CK#	DAN ABRAMOVICH 12960 PINEVIEW DR CLIVE, IA 50325		50.00	<input type="checkbox"/>
11-07-05	ID# CK#	ROBERT JOSTEN 801 RAND SUITE 3900 DM, IA 50309		100.00	<input type="checkbox"/>
11-10-05	ID# CK#	MAGGIE GOODE 2719 FAYRDALE DR DM, IA 50320		40.00	<input type="checkbox"/>
11-10-05	ID# CK#	PHIL DORWEILER 5766 GALLERY CT WDM. IA 50266		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1165.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

**Reset Form**

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)  
 COMMITTEE TO ELECT MICHAEL A. MAURO

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10-26-05	ID# CK#	SUE STEEVE 3012 49TH ST DM, IA 50310		\$50.00	<input type="checkbox"/>
10-26-05	ID# CK#	GRANT VEEDER 135 GRACELINE BLVD WATERLOO, IA 50701		50.00	<input type="checkbox"/>
10-26-05	ID# CK#	MARK MCCORMICK 4331 GREENWOOD DR DM, IA 50312		100.00	<input type="checkbox"/>
10-31-05	ID# CK#	STEVE SARCONI 2400 SOUTH WEST THORNTON DM, IA 50321		100.00	<input type="checkbox"/>
10-31-05	ID# CK#	RICHARD D. EASTER 3078 FOX ST OSCEOLA, IA 50213		100.00	<input type="checkbox"/>
10-31-05	ID# CK#	JODI GJERSVIK 1401 7TH AVE SE ALTOONA, IA 50009		20.00	<input checked="" type="checkbox"/>
10-31-05	ID# CK#	KELLIE DINGMAN-PHELPS 3615 SE 23RD ST DM, IA 50320		20.00	<input checked="" type="checkbox"/>
10-31-05	ID# CK#	JAN E. LECROY 3021 SE HART DM, IA 50320		20.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 460.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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10-24-05	ID# CK#	CLARK RIEKE 2904 SOUTTER AVE SE CEDAR RAPIDS, IA 52403		\$25.00	<input type="checkbox"/>
10-24-05	ID# CK#	MARK DALEY 4400 PARK AVE APT 65 DM, IA 50321		50.00	<input type="checkbox"/>
10-24-05	ID# CK#	C.F. WASKER 4201 WESTOWN PKY SUITE 250 WDM IA 50266		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 175.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

**Reset Form**

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

**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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10-19-05	ID# CK#	CHARLES SHELTON 40838 - 220 AVE. CHARITON, IA 50049		\$25.00	<input checked="" type="checkbox"/>
10-19-05	ID# CK#	MARILYN SPINA 2545 E OVID AVE DM, IA 50317		25.00	<input checked="" type="checkbox"/>
10-19-05	ID# CK#	JERRY NARBER 603 N GRAND CHARITON, IA 50049		25.00	<input checked="" type="checkbox"/>
10-19-05	ID# CK#	C.D. CURAN 5292 - 235TH TRL ALBIA, IA 52531		50.00	<input checked="" type="checkbox"/>
10-19-05	ID# CK#	BRIAN STORM 14532 - 510TH ST LUCAS, IA 50151		50.00	<input checked="" type="checkbox"/>
10-19-05	ID# CK#	JOHN CURRAN 44867 322ND AVE RUSSELL, IA 50238		50.00	<input checked="" type="checkbox"/>
10-19-05	ID# CK#	THOMAS CARPENTER 905 N 16TH ST. CHARITON, IA 50049		75.00	<input checked="" type="checkbox"/>
10-19-05	ID# CK#	GARY LUNDY 22890 - 562 LN CHARITON, IA 50049		100.00	<input checked="" type="checkbox"/>
10-19-05	ID# CK#	MIKE CURRAN 1300 NORTH 17TH ST CHARITON, IA 50049		100.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 500.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

**Reset Form**

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)*  
 COMMITTEE TO ELECT MICHAEL A. MAURO

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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
10-18-05	ID# CK#	CECILIA BACKSTROM 8069 CRESTVIEW DR DM IA 50320		\$10.00	<input checked="" type="checkbox"/>
10-18-05	ID# CK#	DARLENE HATCHITT 5290 E OAKWOOD DR PH, IA 50327		10.00	<input checked="" type="checkbox"/>
10-18-05	ID# CK#	ROSE QUIJANO 1403 SW 1ST ST DM, IA 50315		10.00	<input checked="" type="checkbox"/>
10-18-05	ID# CK#	GARY ASH 2335 E 34TH ST. DM, IA 50317		40.00	<input checked="" type="checkbox"/>
10-18-05	ID# CK#	GORDON FISCHER 1407 41ST ST DM, IA 50311		50.00	<input type="checkbox"/>
10-18-05	ID# CK#	LARRY SCALISE 801 GRAND AVE SUITE 3500 DM IA 50309		250.00	<input type="checkbox"/>
10-18-05	ID# CK#	STACI APPEL 10901 - 180TH AVE ACKWORTH, IA 50001		250.00	<input type="checkbox"/>
10-18-05	ID# CK#	ROBERT HANSEN ON170 ALEXANDER DR GENEVA, IL 60134		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 820.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

**Reset Form**

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<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)*  
 COMMITTEE TO ELECT MICHAEL A. MAURO

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10-11-05	ID# CK#	TONY BISIGNANO 2618 E LEACH AVE DM, IA 50320		\$100.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	LISA TUNKS 2601 E 39TH ST DM, IA 50317		100.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	UNITEMIZED CONTRIBUTIONS		80.00	<input checked="" type="checkbox"/>
10-13-05	ID# CK#	LARRY JAMES 928 CALIFORNIA DR DM, IA 50312		200.00	<input type="checkbox"/>
10-13-05	ID# CK#	RALPH & JUANITA MARASCO 3009 SW 29TH ST. DM, IA 50321		100.00	<input type="checkbox"/>
10-13-05	ID# CK#	JOHN M. TYLER 317 E. MARION DM, IA 50315		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 680.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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**Reset Form**

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)*  
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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
10-11-05	ID# CK#	LINDA SIMMONS 502 E ROSE DM, IA 50315		\$10.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	CYNTHIA FORBES 6826 HEMINGWAY ST JOHNSTON, IA 50131		20.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	SCOTT HORMAN 7858 BOULDER CT WDM, IA 50266		20.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	AMANDA TYLER 3223 SW 8TH ST DM, IA 50315		20.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	RUTH SIMMONS 1343 E 18TH ST DM, IA 50316		25.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	BRIAN ANDREW 620 LITTLE WALNUT CREEK DR WAUKEE, IA 50263		25.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	LARRY BELTRAME 1115 CAULDER DM, IA 50315		25.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	ANGELA BARNES 2719 - 42ND ST DM, IA50310		40.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	RAY BLASE 913 NE 34TH ST ANKENY, IA 50021		40.00	<input checked="" type="checkbox"/>
10-11-05	ID# CK#	PAMELA GILES 4202 S. UNION ST DM, IA 50315		50.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 275.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
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10-06-05	ID# CK#	MATT MCCOY 5016 PLEASANT ST DM, IA 50312		\$100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	THOMAS HENDERSON 6239 N WINWOOD DR JOHNSTON, IA 50131		200.00	<input checked="" type="checkbox"/>
10-06-05	ID# 6113 CK# 003094	AFSCME/IOWA COUNCIL 61 PEOPLE 4320 NW 2ND AVE DM, IA 50313		250.00	<input type="checkbox"/>
10-06-05	ID# CK#	TOM WHITNEY 666 GRAND STE. 1800 DM, IA 50309		250.00	<input type="checkbox"/>
10-06-05	ID# CK#	NED CHIODO 2913 SOUTHERN HILL CIRCLE DM, IA 50321		1000.00	<input type="checkbox"/>
10-06-05	ID# CK#	ROSEMARY MOODY 5285 E. OAKWOOD DR PLEASANT HILL, IA 50327		1000.00	<input type="checkbox"/>
10-06-05	ID# CK#	ED SKINNER BOX 367 ALTOONA, IA 50009		1000.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 3800.0	
<b>TOTAL (if last page of this schedule)</b>				\$	

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**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)  
 COMMITTEE TO ELECT MICHAEL A. MAURO

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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
10-06-05	ID# CK#	ROBERT SIEMAN 4710 GEORGEMILLS CIVIC PKWY UNIT 303 WDM, IA 50265		\$100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	CATHIE J. FEGLEY 3100 SW 38TH PL DM, IA 50321		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	R.J. COMPIANO 6680 EAGLE RIDGE DR JOHNSTON, IA 50131		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	TOM FITZGERALD 658 45TH ST DM, IA 50312		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JO OLDSON 418 38TH PL DM, IA 50312		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	SANDY WELDON 2827 WOLCOTT AVE DM, IA 50321		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MARK DALEY 811 BURR OAKS DR UNIT 1301 WDM, IA 50266		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	KATHLEEN HAMRE 14146 PINNACLE PT. DR CLIVE, IA 50325		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MICHAEL O'MALLEY 3919 SHERMAN BLVD DM, IA 50310		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	ARTHUR HEDBERG 1716 E 31ST CT DM, IA 50317		100.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 1000.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

**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
10-06-05	ID# CK#	ROBERT LIGOURI 1611 NW 107TH ST DM, IA 50325		\$50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOSLIN RAND 3815 SW 9TH #3 DM, IA 50315		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	BEV WHIPPLE 1103 42ND ST DM, IA 503111		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	BRUGIONI, DENNIS 3304 SW 20TH ST ANKENY, IA 50021		60.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	LINDA MCCARTHY 5201 SE 32ND ST DM, IA 50320		75.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MICHAEL J. KIERNAN 750 - 16TH ST DM, IA 50314		75.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	ELISABETH BUCK 5125 HARWOOD DR DM, IA 50312		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	GERI HUSER 213 - 7TH ST. NW ALTOONA, IA 50009		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	GREG UMTHUN 11651 NW 121ST GRANGER, IA 50109		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOHN FLANNERY 1024 - 21ST ST WDM, IA 50254		100.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 760.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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10-06-05	ID# CK#	CONNIE COOK 1301 - 24TH ST. DM, IA 50311		\$50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	DONNA MARASCO 1015 THORNTON AVE DM, IA 50315		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	THERESE CIVITATE 2200 S UNION DM, IA 50315		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	LINDA LANGENBERG 140 PARTRIDE AVE MARION, IA 52302		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOSEPH CACCIATORE 4410 AMICK DM, IA 50310		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOSEPH JONGEWAARD 4039 OVID AVE DM, IA 50310		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	STEVE LARSON 8311 COLBY PKWY #709 URBANDALE, IA 50322		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOHN SARCONE 3004 SW 39TH ST DM, IA 50321		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	ANTHONY MADONIA 3722 SW 28TH ST PL DM, IA 50321		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MICHAEL TRAMONTINA 4819 WATERBURY RD DM, IA 50312		50.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 500.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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**Reset Form**

<b>SCHEDULE</b> <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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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10-06-05	ID# CK#	DAVID CAMPBELL 6671 NE 4TH CT DM, IA 50313		\$40.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MARK BREHENY 2707 EMMA AVE DM, IA 50321		40.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	SHARILYN MAURO 4064 SW 31ST DM, IA 53021	NIECE	40.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	HOLLY SAGAR 4018 E 24TH CT DM, IA 50317		40.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	GARY DICKEY 3607 SE 18TH CT DM, IA 50320		40.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	CARMEN PUTZIER 3924 E 27TH DM, IA 50317		40.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOHN ROWEN 1414 - 8TH AVE SE ALTOONA, IA 50009		40.00	<input checked="" type="checkbox"/>
10-06-06	ID# CK#	DENISE JUNIUS 5925 EP TRUE PKWY UNIT 5 WDM, IA 50266		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	CHRIS COLEMAN 3512 - 48TH PL DM, IA 50310		50.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MACHELLE SHAFFER 3307 59TH ST DM, IA 50322		50.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 430.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

**Reset Form**

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<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)  
 COMMITTEE TO ELECT MICHAEL A MAURO

**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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10-06-05	ID# CK#	ROSE MARY PRATT 411 46TH ST DM, IA 50310		\$20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	TOM VLASSIS 5001 LYNDALE DR DM, IA 50310		25.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	BRAD BURNQUIST 1500 NE 81ST ST CLIVE, IA 50325		25.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	PAULETTE STODGEL 2250 NW 148TH ST. CLIVE, IA 50325		25.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	LAWRENCE POPE 4316 GRAND AVE APT. 11 DM, IA 53012		25.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	TIM MAURO 1173 S 49TH ST. WDM, IA 50265	NEPHEW	25.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	DAVID SULLIVAN 7018 FRANKLIN AVE DM, IA 50322		25.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOANNA SCHMELING 516 SE BROAD DM, IA 50315		25.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	KEN AGEY 3121 SW 32ND PL DM, IA 50321		25.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	BARB HILDEBRANDT 2607 EMMA AVE DM, IA 50321		30.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 250.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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10-06-05	ID# CK#	DIANNE LIEPA 603 E SALEM AVE INDIANOLA, IA 50125		\$20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	DAVE NEIL 9324 BISHOP LA PORTE CITY, IA 50651		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JANE KRUMM 3596 1 AVE EARLHAM, IA 50072		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JAMES MURPHY 1925 SE 82ND ST RUNNELLS, IA 50237		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JON NEIDERBACH 642 POLK BLVD DM, IA 50312		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOHN PEDERSON 1075 44TH ST DM, IA 503111		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	DAWN WILSON 100 MARKET ST. #412 DM, IA 50309		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MICHAEL FREILINGER PO BOX 93003 DM, IA 50393		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MARY TAYLOR 4321 OVID DM, IA 50310		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	KAREN REMUS 1914 NW SCHOOL ST ANKENY, IA 50021		20.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 200.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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10-06-05	ID# CK#	TOM HOCKENSMITH 3502 E 43RD CT DM, IA 50317		\$40.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MERLE HICKS 800 NW 43RD AVE. DM, IA 50313		100.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	GEORGE COOK 4022 MUSKOGEE DM, IA 50312		10.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOE MAURO 3614 ROSE AVE DM, IA 50321	NEPHEW	20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	ROSE LEONETTI 330 E GRAY ST. DM, IA 50315		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JUDITH LOWE 3418 KINGMAN BLVD DM, IA 50311		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	STEVE HERMAN 3418 KINGMAN BLVD DM, IA 50311		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	ROBERT MULQUEEN 2305 GLENWOOD DM, IA 50321		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOE O'HERN 6085 GREYWOOD CIR JOHNSTON, IA 50131		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	GEORGE APPLEBY 10163 NORTHWEST 102ND ST CLIVE, IA 50325		20.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 290.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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Reset Form

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<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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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10-06-05	ID# CK#	BILL WIMMER 3504 129TH ST. URBANDALE, IA 50322		\$20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOE MOWERS 7609 BUCKINGHAM SQ APT 298 URBANDALE, IA 50322		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	BRUCE KREUGER 2809 RUTLNAD AVE. #3 DM, IA		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	MOLLY CLAUSE 1684 MULLER LANE WINTERSET, IA 50273		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	ARNE PETERSON 2220 CAPITAL DM, IA 50317		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOHN BEIN 132 SNYDER BONDURANT, IA 50035		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	LARRY NOBLE 3311 E AURORA AVE DM, IA 50317		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	PAM MORNINGSTAR 6045 NE 9TH ST DM, IA 50313		20.00	<input checked="" type="checkbox"/>
10-06-05	ID# CK#	JOE TURSI 3514 SW 37TH ST. DM, IA 50321		40.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 200.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)

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10-05-05	ID# CK#	SHIRLEY SAMUELSON 466 27TH ST DM, IA 50312		\$20.00	<input checked="" type="checkbox"/>
10-05-05	ID# CK#	BARBARA TROUT 4909 SW 18TH ST. DM, IA 50315		25.00	<input checked="" type="checkbox"/>
10-05-05	ID# CK#	PAUL ANDREW 3300 SOUTHERN WOODS DR DM, IA 50321		40.00	<input checked="" type="checkbox"/>
10-05-05	ID# CK#	KIRK WINDERS 3512 E 43RD CT DM, IA 50317		50.00	<input type="checkbox"/>
10-05-05	ID# CK#	JAMES MURPHY 1925 SE 82ND ST RUNNELLS, IA 50237		35.00	<input type="checkbox"/>
10-05-05	ID# CK#	FRANK & MARY DOBRYDNEY 8623 JAMES CREEK DRIVE SPRINGFIELD, VA 22152	Brother-in-law Sister-in-law	40.00	<input type="checkbox"/>
10-05-05	ID# CK#	KEITH OLSON 3509 SW 44TH ST DM, IA 50321		150.00	<input type="checkbox"/>
10-05-05	ID# CK#	JAMES FITZGERALD 3036 E DIEHL AVE DM, IA 50320		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 560.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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<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)  
 COMMITTEE TO ELECT MICHAEL A. MAURO

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09-29-05	ID# CK#	BRAD WINTERBOTTOM 4728 - 95TH ST. DM, AI 50322		\$25.00	<input type="checkbox"/>
09-29-05	ID# CK#	TAMMY S. BERENGUEL 610 MAXWELTON DR DM, IA 50315		20.00	<input checked="" type="checkbox"/>
09-29-05	ID# CK#	MARILYN SPINA 2545 E OVID AVE DM, IA 50317		100.00	<input type="checkbox"/>
09-30-05	ID# CK#	LINDA SIMMONS 502 E ROSE DM, IA 50315		100.00	<input type="checkbox"/>
09-30-05	ID# CK#	ARLINDA MCKEEN 5822 WATERBURY RD DM, IA 50312		100.00	<input type="checkbox"/>
09-30-05	ID# CK#	TOM SLATER 118 NORTHWOOD RD DM IA 50312		100.00	<input type="checkbox"/>
09-30-05	ID# CK#	GAYLE COLLINS 100 MARKET ST #418 DM, IA 50309		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 495.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

**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
09-27-05	ID# CK#	BARB POST-ALTHAUS 1510 THOMPSON AVE DM, IA 50310		\$100.00	<input type="checkbox"/>
09-27-05	ID# CK#	CHARLES FUNARO 2420 E. 29TH ST. DM, IA 50317		100.00	<input type="checkbox"/>
09-27-05	ID# CK#	JULIE HAGGERTY 9916 TANGLEWOOD DR. DM, IA 50322		100.00	<input type="checkbox"/>
09-27-05	ID# CK#	MARY SPINA 2722 RICHMOND DM, IA 50317		20.00	<input checked="" type="checkbox"/>
09-27-05	ID# CK#	KATHRYN J. HEDBERG-RAMAEKERS 1816 79TH ST WINDSOR HEIGHTS, IA 50322		25.00	<input checked="" type="checkbox"/>
09-27-05	ID# CK#	RHONDA DUNCAN 2509 W 10TH AVE INDIANOLA, IA 50125		25.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 370.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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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
09-19-05	ID# CK#	KYLE LOBNER 2925 BRATTLEBORO AVE DM, IA 50311		\$20.00	<input type="checkbox"/>
09-19-05	ID# CK#	LARRY SPINA 2722 RICHMOND AVE DM, IA 50317		25.00	<input type="checkbox"/>
09-19-05	ID# CK#	GARY RANDA 3029 WOLCOTT AVE DM, IA 50321		250.00	<input type="checkbox"/>
09-19-05	ID# CK#	JAMES COWINE 141 37TH ST DM, IA 50312		1000.00	<input type="checkbox"/>
09-19-05	ID# CK#	JAMES BRICK 550 29TH ST SUITE 200 DM, IA 50312		1000.00	<input type="checkbox"/>
09-19-05	ID# CK#	WILLIAM KNAPP 4949 WESTOWN PARKWAY SUITE 200 WDM, IA 50266		2500.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 4795.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

**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
09-20-05	ID# CK#	PETER MARASCO 3224 SUMMIT VISTA DR DM, IA 50321		\$50.00	<input type="checkbox"/>
09-20-05	ID# CK#	TOM TIMMONS BOX 14 PRAIRIE CITY, IA 50228		100.00	<input type="checkbox"/>
09-20-05	ID# CK#	CHARLES SHERIDAN 814 - 13TH AVE N. APT 5C CLINTON, IA 52732		100.00	<input type="checkbox"/>
09-21-05	ID# CK#	SAM GILLOTTI 5905 S WINWOOD JOHNSTON, IA 50131		125.00	<input type="checkbox"/>
09-21-05	ID# CK#	GEORGE APPLEBY 10163 NORTHWEST 102ND ST CLIVE, IA 50325		100.00	<input type="checkbox"/>
09-21-05	ID# CK#	GINA CARTER 1816 - 61ST DM, IA 50322		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 675.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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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
09-09-05	ID# CK#	MARILYN SPINA 2545 OVID DM, IA 50317		\$100.00	<input type="checkbox"/>
09-09-05	ID# CK#	CONNIE SCHNOEBELEN 4061 SW 31ST ST DM, IA 50321		50.00	<input type="checkbox"/>
09-09-05	ID# CK#	HUSS, DON 2900 SW 14TH DM, IA 53015		50.00	<input type="checkbox"/>
09-09-05	ID# CK#	THERESA KEHOE 2813 VIRGINIA PL DM, IA 50311		50.00	<input type="checkbox"/>
09-09-05	ID# CK#	SHERRY PERKOVICH 5300 SE 1ST CT DM, IA 50315		100.00	<input type="checkbox"/>
09-19-05	ID# CK#	MARY JO HOFFMANS 6620 OLIVER SMITH DR URBANDALE, IA 50322		20.00	<input checked="" type="checkbox"/>
09-19-05	ID# CK#	REBECCA SMITH 601 NE INSSBRUCK DR ANKENY, IA 50021		20.00	<input checked="" type="checkbox"/>
09-19-05	ID# CK#	LOIS DAVIS 5221 VILLAGE RUN AVE UNIT 501 DM, IA 50317		20.00	<input checked="" type="checkbox"/>
09-19-05	ID# CK#	KELLY LOW 2021 COOLIDGE ST NORWALK, IA 50211		30.00	<input checked="" type="checkbox"/>
09-19-05	ID# CK#	MARC BELTRAME 3409 SW 44TH PL DM, IA 50321		20.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 460.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

**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
09-01-05	ID# CK#	ISABELLA MARTURELLO 3620 SW 9TH ST DM, IA 50315		\$25.00	<input type="checkbox"/>
09-01-05	ID# CK#	CLAUDIA LUCIA 3716 SE 12TH ST DM, IA 50315		50.00	<input type="checkbox"/>
09-01-05	ID# CK#	LEE DUIN 800 SE UEHLAMAR DR ANKENY, IA 50021		100.00	<input type="checkbox"/>
09-02-05	ID# CK#	FRANK J. VITO 3116 SW 14TH ST DM, IA 50315		30.00	<input type="checkbox"/>
09-02-05	ID# CK#	FRANK CELSI 131 HARTFORD AVE DM, IA 50315		50.00	<input type="checkbox"/>
09-02-05	ID# CK#	JAMES HAYES 1142 E COURT ST IOWA CITY, IA 52240		100.00	<input type="checkbox"/>
09-02-05	ID# CK#	KEN AGEY 3121 SW 32ND PL DM, IA 50321		100.00	<input type="checkbox"/>
09-06-05	ID# CK#	CHARLES BROOKS 4323 GRAND AVE DM, IA 50312		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 505.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
 COMMITTEE TO ELECT MICHAEL A. MAURO

**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
08-24-05	ID# CK#	JOSEPH DEANGELIS 3812 SW 32ND ST. DM, IA 50321		\$75.00	<input type="checkbox"/>
08-24-05	ID# CK#	NEAL SMITH 300 WALNUT ST.UNIT 90 DM, IA 50309		200.00	<input type="checkbox"/>
08-24-05	ID# CK#	RAMONA CUNNINGHAM 513 WEST VINE ST. CHARLES, IA 50240		300.00	<input type="checkbox"/>
08-29-05	ID# CK#	DARREN SICKERSON 3208 89TH ST. URBANDALE, IA 50322		50.00	<input type="checkbox"/>
08-30-05	ID# CK#	MARIA METGE 3000 SW THORNTON AVE DM, IA 50021		25.00	<input type="checkbox"/>
08-30-05	ID# CK#	DAVID RICCADONNA 2515 NE 51ST CT DM, IA 50317		200.00	<input type="checkbox"/>
08-31-05	ID# CK#	CINDY WIELAND 7830 BOULDER CT WDM, IA 50266		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 950.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

Reset Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 COMMITTEE TO ELECT MICHAEL A. MAURO

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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
08-22-05	ID# CK#	JOHN FLANNERY 1024 - 21ST ST. WDM, IA 50265		\$25.00	<input type="checkbox"/>
08-22-05	ID# CK#	FERRIN, ERNIE 3000 SUMMIT VISTA DR DM, IA 50321		100.00	<input type="checkbox"/>
08-22-05	ID# CK#	THERESA DEFRANCISCO 1614 E VIRGINIA AVE DM, IA 50320	Sister	100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 225.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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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
08-18-05	ID# CK#	GEORGE DAVIS 3124 SW 29TH DM, IA 50321		\$100.00	<input type="checkbox"/>
08-18-05	ID# CK#	JOHN R CHIDO 2415 SW EMMA DM, IA 50321		150.00	<input type="checkbox"/>
08-15-05	ID# CK#	MICHAEL FREILINGER PO BOX 93003 DM, IA 50393		250.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 500.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

**Reset Form**

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <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)

COMMITTEE TO ELECT MICHAEL A. MAURO

**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
08-17-05	ID# CK#	FRANK TURSI 3830 THORNTON DES MOINES, IA 50321		\$50.00	<input type="checkbox"/>
08-17-05	ID# CK#	DR. STEVE GLEASON 229 - 58TH PL DM, IA 50312		100.00	<input type="checkbox"/>
08-17-05	ID# CK#	DEL PAIGENTINI 8021 GARRISON RD CLIVE, IA 50325		200.00	<input type="checkbox"/>
08-17-05	ID# CK#	CHUCK CELSI 2809 ASHWORTH RD WDM, IA 50265		250.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 600.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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**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)*  
 COMMITTEE TO ELECT MICHAEL A. MAURO

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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
08-16-05	ID# CK#	LONNIE SEVERINO 115 WATROUS AVE DM, AI 50315		\$50.00	<input type="checkbox"/>
08-16-05	ID# CK#	JACK HATCH 696 18TH ST DM, IA 53014		100.00	<input type="checkbox"/>
08-16-05	ID# CK#	JO ELLEN BIGELOW 8014 OAKWOOD DR DM, IA 50322		150.00	<input type="checkbox"/>
08-16-05	ID# CK#	KEVIN SULLIVAN 12866 LINCOLN AVE DM, IA 50325		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 500.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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**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)*  
 COMMITTEE TO ELECT MICHAEL A. MAURO

**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
08-15-05	ID# CK#	MARY NEWELL 100 LINCOLN ST BONDURANT, IA 50035		\$100.00	<input type="checkbox"/>
08-15-05	ID# CK#	JOHN CACIATORE 1700 CASADY DR DM, IA 50315		100.00	<input type="checkbox"/>
08-15-05	ID# CK#	JOHN FERIN 610 NE BRISTOL DR ANKENY, IA 50021		100.00	<input type="checkbox"/>
08-15-05	ID# CK#	RON CARZOLI 5208 CODY DR WDM, IA 50265		200.00	<input type="checkbox"/>
08-15-05	ID# CK#	MIKE SCIONE 4300 SE 2ND ST DM, IA 50315		200.00	<input type="checkbox"/>
08-15-05	ID# CK#	MICHAEL COPPOLA 4521 FLEUR DR SUITE C DM, IA 50321		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 900.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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08-12-05	ID# CK#	DONALD ROWEN 3407 CROCKER DM, IA 50312		\$25.00	<input type="checkbox"/>
08-12-05	ID# CK#	MICHELLE BUNKERS 4620 SE 34TH ST DM, IA 50320	Niece	50.00	<input type="checkbox"/>
08-12-05	ID# CK#	DEANA HOSIER 8283 SE 13TH AVE RUNNELLS, IA 50237		50.00	<input type="checkbox"/>
8-12-05	ID# CK#	MICHAEL O'MEARA 4621 FIELDSTONE DR WDM, IA 50265		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 175.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

**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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08-09-05	ID# CK#	ESTHER ANANIA 1007 JARVIS DM, IA 50315		\$10.00	<input type="checkbox"/>
08-09-05	ID# CK#	EUGENE BLANSHAN 5135 PANORAMA DRIVE PANORA, IA 50216		50.00	<input type="checkbox"/>
08-09-05	ID# CK#	PAM CONNER 2715 E 40TH ST DM, IA 50317		250.00	<input type="checkbox"/>
08-10-05	ID# CK#	PAT RENDA 3030 STANTON AVE DM, IA 50321		50.00	<input type="checkbox"/>
08-10-05	ID# CK#	ANTONIO COLACINO 4645 ELM ST WDM, IA 50265		75.00	<input type="checkbox"/>
08-10-05	ID# CK#	ED NAHAS 3906 SW 28TH PL DM, IA 50321		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 635.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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Reset Form

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)  
 COMMITTEE TO ELECT MICHAEL A. MAURO

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08-08-05	ID# CK#	PAULEE LIPSMAN 2880 GRAND AVE #106 DES MOINES, IA 50312		\$50.00	<input type="checkbox"/>
08-08-05	ID# CK#	CLARA ZENTI 243 E GRANGER AVE DM, IA 50315		50.00	<input type="checkbox"/>
08-08-05	ID# CK#	DAVID PALMER 213 SW FLYNN DR ANKENY, IA 50021		50.00	<input type="checkbox"/>
08-08-05	ID# CK#	JENNIFER SANFORD 8051 SE VANDALIA DR RUNNELLS, IA 50237		75.00	<input type="checkbox"/>
08-08-05	ID# CK#	DONNELLE COLOSIMO 2906 WATROUS AVE DES MOINES, IA 50321		100.00	<input type="checkbox"/>
08-08-05	ID# CK#	JENNIFER GALLOWAY 3516 129TH ST URBANDALE, IA		100.00	<input type="checkbox"/>
08-08-05	ID# CK#	PATTY LINK 4129 FOREST AVE DES MOINES, IA 50311		100.00	<input type="checkbox"/>
08-08-05	ID# CK#	PETE LEO 3515 TRUBER PL DES MOINES, IA 50315		100.00	<input type="checkbox"/>
08-08-05	ID# CK#	DAVID DEBOLT 21 E GRANGER AVE DES MOINES, IA 50315		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 725.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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**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)

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08-03-05	ID# CK#	EDWARD COPPOLA 13455 NOEL RD STE 400 DALLAS, TX 75240		\$2000.00	<input type="checkbox"/>
08-05-05	ID# CK#	MARGUERITE MC NABB 1232 WISCONSIN AVE AMES, IA 50010		30.00	<input type="checkbox"/>
08-05-05	ID# CK#	MARILYN SPINA 2545 E OVID AVE DM, IA 50317		40.00	<input type="checkbox"/>
08-05-05	ID# CK#	MAXINE FLAHERTY 1834 EVERGREEN DM, IA 50320		50.00	<input type="checkbox"/>
08-05-05	ID# CK#	THOMAS A. FORMARO 3739 SW 34TH ST. DM, IA 50321		50.00	<input type="checkbox"/>
08-05-05	ID# CK#	JANE HEIN 3819 THORNTON AVE DM, IA 50321		50.00	<input type="checkbox"/>
08-05-05	ID# CK#	TONY MAURO 3010 STANTON AVE DM, IA 50321		60.00	<input type="checkbox"/>
08-05-05	ID# CK#	LARRY LAND 6048 TERRACE DR JOHNSTON, IA 50131		100.00	<input type="checkbox"/>
08-05-05	ID# CK#	BECKY DEWEY 608 LEACH AVE DM, IA 50315		100.00	<input type="checkbox"/>
08-05-05	ID# CK#	KENNETH SHUFELT 2625 VINE NO. 107 WDM, IA 50265		200.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 2680.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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**Reset Form**

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<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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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08-03-05	ID# CK#	GERARD NEUGENT 5000 WESTOWN PKWY SUITE 100 WDM, IA 50266		\$100.00	<input type="checkbox"/>
08-03-05	ID# CK#	FRANCIS ANANIA 3125 SW PARK PLZ DM, IA 50315		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	GEORGE PALETTA 4415 SW 31ST ST DM, IA 50321		200.00	<input type="checkbox"/>
08-03-05	ID# CK#	DON MAURO 1629 E VIRGINIA DM, IA 50320	BROTHER	200.00	<input type="checkbox"/>
08-03-05	ID# CK#	MATT GANNON 2701 CLAVERT ST NW APT 403 WASHINGTON, DC 20008		200.00	<input type="checkbox"/>
08-03-05	ID# CK#	JAMES CATALDO 3429 ROSE AVE DM, IA 50321		200.00	<input type="checkbox"/>
08-03-05	ID# CK#	JAMES A. COGGI 1243 - 8TH ST WDM, IA 50265		200.00	<input type="checkbox"/>
08-03-05	ID# CK#	ED BOESEN 3400 BEAVER AVE DM, IA 50310		200.00	<input type="checkbox"/>
08-03-05	ID# CK#	STEVEN CUNNINGHAM 6752 SE 32ND AVE PLEASANT HILL, IA 50327		250.00	<input type="checkbox"/>
08-03-05	ID# CK#	PETER MARASCO 3224 SUMMIT VISTA DR DM, IA 50321		500.00	<input type="checkbox"/>
SUB-TOTAL				\$ 2150.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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08-03-05	ID# CK#	JOANNE MAURO 200 E GRANGER DES MOINES, IA 50315	SISTER	\$100.00	<input type="checkbox"/>
08-03-05	ID# CK#	JAMES MALONEY 3940 RIVER OAKS DR DM, IA 50312		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	NICHOLAS IARIA 3420 SW 12TH PL DES MOINES, IA 50315		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	JOHN LABONIA 4333 SW 31ST ST DM, IA 50321		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	WILLIAM LILLIS 3000 PATRICIA DR DM, IA 50322		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	STEPHAN HAMPTON 650 - 63RD DM, IA 50312		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	VICKI CHIA 21606 485TH LANE CHARITON, IA 50049		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	MATTHEW BRICK 1623 MAIN ST UNIT 808 DALLAS, TX 75201		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	HAROLD BELKEN 416 SE GRAY ST DM, IA 50315		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	RICHARD GIOFFREDI 4116 E 8TH ST. DM, IA 53013		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1000.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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**Reset Form**

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<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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08-03-05	ID# CK#	FRANKIE COMPIANO 4022 SW 31ST DM, IA 50321		\$50.00	<input type="checkbox"/>
08-03-05	ID# CK#	RICHARD CACCIATORE 3405 SE 4TH ST. DM, IA 50315		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	MARY ANN BENNETT 8324 HAMMONTREE DR URBANDALE, IA 50322		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	A. F. PORTO 13601 SHERIDAN DR URBANDALE, IA 50322		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	LINDA SHEPHERD 700 SE DIEHL AVE DM, IA 50315		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	CONNIE WIMER 100 4TH ST DM, IA 53009		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	JOSEPH SHANNAHAN 3801 EP TRUE UNIT 703 WDM, IA 50265		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	VICTOR SCAGLIONE 3806 SW 28TH PL DM, IA 50321		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	PETER RENZO 119 E. OLINDA AVE. DM, IA 50315		100.00	<input type="checkbox"/>
08-03-05	ID# CK#	NED MILLER 2104 75TH ST. DM, IA 50322		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 800.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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<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)  
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08-03-05	ID# CK#	GARY RUNGE 3020 SW THORNTON AVE. DES MOINES, IA 50321		\$25.00	<input type="checkbox"/>
08-03-05	ID# CK#	PETER LIPOVAC PO BOX 942 BLACKFOOT, ID 83221		40.00	<input type="checkbox"/>
08-03-05	ID# CK#	RITA SALMONS 8713 SNAPDRAGON LN URBANDALE, IA 50322		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	JOHN PASCUZZI 4200 SW 27TH ST. DM, IA 50321		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	ANTHONY PALMER 4835 LAKEWOOD DR. NORWALK, IA 50211		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	DIANE NEUGENT 3830 SW 30TH ST. DES MOINES, IA 50321		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	MARTHA MILLER 52230 E OAKWOOD DR PLEASANT HILL, IA 50327		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	SHERRY MAHRENHOLZ 13525 BIRCH LN DM, IA 50315		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	SUZANNE FLYNN OVID AVE DM, IA 50310		50.00	<input type="checkbox"/>
08-03-05	ID# CK#	SAM COLACINO 705 SE VIRGINIA DES MOINES, IA 50315		50.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 465.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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 COMMITTEE TO ELECT MICHAEL A. MAURO

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07-29-05	ID# CK#	RICHARD YOUNGS 411 SILVERLEAF LANE ALTOONA, IA 50009		\$100.00	<input type="checkbox"/>
07-29-05	ID# CK#	JENELLE SARCONE 3142 DRUID HILL DR. DES MOINES, IA 50315		100.00	<input type="checkbox"/>
07-29-05	ID# CK#	DALE HYMAN 1427 - 40TH ST. DES MOINES, IA 50311		100.00	<input type="checkbox"/>
07-29-05	ID# CK#	BONNIE CAMPBELL 3131 FLEUR DR APT. 702 DES MOINES, IA 50321		250.00	<input type="checkbox"/>
07-29-05	ID# CK#	SHARI FITZGERALD 726 NE 3RD ST. FORT DODGE, IA 50501		250.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 800.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

**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
07-29-05	ID# CK#	CAROLYN COLOSIMO 806 MAISH DES MOINES, IA 50315		\$25.00	<input type="checkbox"/>
07-29-05	ID# CK#	JIM VIVIONE 308 E DUNHAM AVE DES MONIES, IA 50315		50.00	<input type="checkbox"/>
07-29-05	ID# CK#	STEPHANIE TECHAU 1118 - 44TH ST. DES MOINES, IA 50311		50.00	<input type="checkbox"/>
07-29-05	ID# CK#	SUE HAGAN 723 NW GREENWOOD ST. ANKENY, IA 50021		50.00	<input type="checkbox"/>
07-29-05	ID# CK#	DICK DEARDEN 3113 KINSEY AVE. DES MOINES, IA 50317		50.00	<input type="checkbox"/>
07-29-05	ID# CK#	RANDY RIPPERGER 623 W. WASHINGTON ST. WINTERSET, IA 50273		50.00	<input type="checkbox"/>
07-29-05	ID# CK#	PATRICIA UMTHUN 11651 NW 121 ST GRANGER, IA 50109		50.00	<input type="checkbox"/>
07-29-05	ID# CK#	HARRY BOOKEY 400 LOCUST ST. SUITE 790 DES MOINES, IA 50309		50.00	<input type="checkbox"/>
07-29-05	ID# CK#	KENNETH KLINE 731 S MONROE CT MASON CITY, IA 50401		100.00	<input type="checkbox"/>
07-29-05	ID# CK#	NANCY ANDREW 1407 LINDEN LANE DES MOINES, IA 50315		100.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 575.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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For Instructions, See Back of Form

**Reset Form**

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY</b> <b>RECEIPTS</b>
<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)*  
 COMMITTEE TO ELECT MICHAEL A. MAURO

**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
07-26-05	ID# CK#	MARK SCHULING 500 GLENVIEW DR DES MOINES, IA 50312		\$50.00	<input type="checkbox"/>
07-26-05	ID# CK#	RAY BLASE 913 NE 34TH ST. ANKENY, IA 50021		50.00	<input type="checkbox"/>
07-26-05	ID# CK#	NATALIE CATALDO 3600 ROSE AVE DES MOINES, IA 50321		50.00	<input type="checkbox"/>
07-26-05	ID# CK#	TERI MC DERMOTT 1723 MAR-ELLA TRAIL DES MOINES, IA 503210		100.00	<input type="checkbox"/>
07-26-05	ID# CK#	B. E. RICE 821 E MILLER DES MOINES, IA 50315		100.00	<input type="checkbox"/>
07-26-05	ID# CK#	PETE RICCELLI 3803 INDIANOLA RD DES MOINES, IA 50320		100.00	<input type="checkbox"/>
07-26-05	ID# CK#	MARILYN SPINA 2545 E OVID AVE DES MOINES, IA 50317		100.00	<input type="checkbox"/>
07-26-05	ID# CK#	BILL FREEL 713 CRESTON DES MOINES, IA 50315		100.00	<input type="checkbox"/>
07-26-06	ID# CK#	CHARLES SOVICH 3450 SW 31ST DES MOINES, IA 50321		200.00	<input type="checkbox"/>
07-26-05	ID# CK#	VINCENT DEANGELIS 3812 SW 32ND ST. DES MOINES, IA 50321		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 1050.00	
<b>TOTAL (if last page of this schedule)</b>				\$	
				\$	

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For Instructions, See Back of Form

**Reset Form**

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

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

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

COMMITTEE TO ELECT MICHAEL A. MAURO

**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
04-25-05	ID# CK#	DENNIS PARROTT 345 2. 28TH ST. S. NEWTON, IA 50208		\$100.00	<input type="checkbox"/>
04-25-05	ID# CK#	LINDA LANGENBERG 140 PARTRIDGE AVE. MARION, IA 52302		100.00	<input type="checkbox"/>
05-10-05	ID# CK#	MICHAEL GARTNER 5315 WATERBURY RD DES MOINES, IA 50312		2000.00	<input type="checkbox"/>
05-24-05	ID# CK#	GARY RANDA 3029 WOLCOTT AVE. DES MOINES, IA 50321		200.00	<input type="checkbox"/>
06-09-05	ID# CK#	MARILYN SPINA 2545 E. OVID AVE. DES MOINES, IA 50317		50.00	<input type="checkbox"/>
06-24-05	ID# CK#	JAMES NAHAS 4803 VALLEY VIEW LANE WDM, IA 50265		300.00	<input type="checkbox"/>
07-12-05	ID# CK#	MICHAEL HANSEN 4000 - 46TH ST. DES MOINES, IA 50310		100.00	<input type="checkbox"/>
07-26-05	ID# CK#	R. M. MCCARGAR 1111 RANCHEL DRIVE DES MOINES, IA 50320		50.00	<input type="checkbox"/>
07-26-05	ID# CK#	BON CHACON 607 SW MAISH DES MOINES, IA 50315		50.00	<input type="checkbox"/>
07-26-06	ID# CK#	MICHAEL PAINOVICH 812 - 4TH ST. WDM, IA 50265		50.00	<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 3000.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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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)*  
 COMMITTEE TO ELECT MICHAEL A. MAURO

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE <i>(Disbursement)</i> WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-28-05	ID# CK#	US CELLULAR PO BOX 0203 PALATINE, IL 60055	CELL PHONE FOR CAMPAIGN	\$ 46.54
11-28-05	ID# CK#	CHASE PO BOX 94014 PALATINE, IL 60094	GAS-TRAVELING FOR CAMPAIGN & MEETINGS & WEB PAGE EXPENSES FOR CAMP.	827.11
12-09-05	ID# CK#	POLK COUNTY DEMOCRATS PO BOX 5102 DM, IA	CONTRIBUTION	20.00
	ID# CK#			
SUB-TOTAL				\$ 893.65
<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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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
10-21-05	ID# CK#	POLK COUNTY DEMOCRATS PO BOX 5102 DM, IA	CONTRIBUTION	\$ 225.00
10-21-05	ID# CK#	MICHAEL A. MAURO 4325 SW 31ST DM, IA 50321	REIMBURSE FOR GAS	35.04
10-26-05	ID# CK#	BLACK HAWK CO DEMOCRATS 801 SHERIDAN RD WATERLOO, IA 50707	CONTRIBUTION	15.00
10-27-05	ID# CK#	CHASE PO BOX 94014 PALATINE, IL	GAS-TRAVELING FOR CAMPAIGN & CAMPAIGN MEETINGS	394.79
10-27-05	ID# CK#	CARTER PRINTING 1739 E GRAND DM, IA 50316	LETTERHEAD & ENVELOPES	331.78
10-27-05	ID# CK#	US CELLULAR PO BOX 7835 MADISON, WI 53707	CELL PHONE FOR CAMPAIGN	57.38
10-27-05	ID# CK#	WEST BANK PO BOX 65020 WDM IA 50265	SERVICE CHARGE	12.19
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 1071.18</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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
10-06-05	ID# CK#	LOFFREDO PRODUCE 4001 SW 63RD ST DM, IA 50321	LETTUCE FOR FUNDRAISER	\$ 59.75
10-10-05	ID# CK#	GRZIANOS 1601 SOUTH UNION DM, IA 50315	FOOD FOR FUNDRAISER	331.50
10-10-05	ID# CK#	FAYETTE CO DEMOCRATS 2057 NEON RD OELEWEIN, IA 50662	CONTRIBUTION	50.00
10-11-05	ID# CK#	PAM CONNER 2715 E 40TH ST DM, IA 50317	PAPER PRODUCTS FOR FUNDRAISER	122.23
10-11-05	ID# CK#	POSTMASTER 1165 - 2ND AVE DM, IA	POSTAGE	74.00
10-12-05	ID# CK#	SOUTHSIDE RAILS 3522 SW 12TH DM, IA 50315	CONTRIBUTION	25.00
10-19-05	ID# CK#	TERRIBLE'S LAKESIDE CASINO PO BOX 424 OSCEOLA, IA 50212	FOOD FOR FUNDRAISER	501.00
10-20-05	ID# CK#	POSTMASTER 1165 2ND AVE DM, IA	POSTAGE	74.00
<b>SUB-TOTAL</b>				<b>\$ 1237.48</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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
09-28-05	ID# CK#	US CELLULAR PO BOX 0203 PLATINE, IL 60055	CAMPAIGN CELL PHONE	\$ 46.54
09-28-05	ID# CK#	BREWER WHOLESALE 2418 SUNSET RD DM, IA 50321	MEAT FOR FUNDRAISER	142.10
09-29-05	ID# CK#	HY VEE 2640 E EUCLID AVE DM, IA 50317	DONUTS FOR CAMPAIGN MEETING	32.05
09-29-05	ID# CK#	CARTER PRINTING 1739 E GRAND AVE DM, IA 50316	MAGNETIC CAR SIGNS	143.10
09-29-05	ID# CK#	CHASE PO BOX 94014 PALATINE, IL 60094	GAS-TRAVELING FOR CAMPAIGN & CAMPAIGN MEETINGS	509.66
10-03-05	ID# CK#	TUMEA'S 1501 SE 1ST DM, IA	COOKING OIL FOR FUNDRAISER	50.55
10-10-05	ID# CK#	DAVE SEYBERT 9824 BISCAYNE DR JOHNSTON, IA 50131	POLICE OFFICER FOR FUNDRAISER	90.00
10-04-05	ID# CK#	ROSEMARY MOODY 5285 E OAKWOOD PLEASANT HILL, IA 50237	REIMBURSE FOR CANDY FOR FUNDRAISER	14.43
SUB-TOTAL				\$ 1028.43
<b>TOTAL (if last page of this schedule)</b>				\$

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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**

<b>SCHEDULE</b> <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)  
 COMMITTEE TO ELECT MICHAEL A. MAURO

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
08-29-05	ID# CK#	DM COUNTY DEMOCRATS 2200 SUMMER ST. BURLINGTON, IA 52601	CONTRIBUTION	\$ 30.00
09-02-05	ID# CK#	POSTMASTER 1165 - 2ND AVE DM, IA	POSTAGE	198.80
09-02-05	ID# CK#	WEST BANK PO BOX 65020 WDM, IA 50265	SERVICE CHARGE	3.45
09-10-05	ID# CK#	DALLAS CO. DEMOCRATS 1833 J AVE ADEL, IA 50003	CONTRIBUTION	25.00
09-18-05	ID# CK#	AFSCME LOCAL 1868 110 2ND AVE DM,IA 50309	CONTRIBUTION	110.00
09-14-05	ID# CK#	POSTMASTER 1165 2ND AVE DM, IA	POSTAGE	74.00
09-19-05	ID# CK#	CARTER PRINTING 1739 E GRAND AVE DM, IA 50316	BANNER, TICKETS, FLYER	374.18
09-21-05	ID# CK#	RICCELLI'S 3803 INDIANOLA AVE DM, IA 50320	MEETING TO PLAN FUNDRAISER	108.76
<b>SUB-TOTAL</b>				<b>\$ 924.19</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>

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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**

**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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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
08-27-05	ID# CK#	NAF 6880 EAGLE RIDGE DR JOHNSTON, IA	CONTRIBUTION	\$ 100.00
08-28-05	ID# CK#	POTTAWATTAMIE DEMOCRATS PO BOX 233 COUNCIL BLUFFS, IA 515-2	CONTRIBUTION	50.00
08-29-05	ID# CK#	US CELLULAR PO BOX 0203 PALATINE, IL 60055	CELL PHONE FOR CAMPAIGN	46.54
08-29-05	ID# CK#	PAM CONNER 2715 E 40TH ST DM, IA 50318	REIMBURSEMENT FOR PARADGE CANDY	61.50
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 258.04</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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
07-19-05	ID# CK#	CHASE PO BOX 94017 PALATINE, IL 60094	GAS-TRAVELING FOR CAMPAIGN & CAMPAIGN MEETINGS	\$ 219.40
07-19-05	ID# CK#	POSTMASTER 1165 52ND ST DM, IA 50318	POSTAGE	185.00
07-26-06	ID# CK#	US CELLULAR PO BOX 0202 PALATINE, IL 60055	CELL PHONE FOR CAMPAIGN	79.95
08-09-05	ID# CK#	POSTMASTER 1165 2ND AVE DM, IA 50318	POSTAGE	74.00
08-22-05	ID# CK#	ST. ANTHONY'S 15 INDIANOLA AVE DM, IA	RENT FOR FUNDRAISER	800.00
08-18-05	ID# CK#	OKTEMBERFEST PARADE PO BOX 1616 MARSHALLTOWN, IA 50158	ENTRY FEE FOR PARADE	20.00
08-23-05	ID# CK#	CARTER PRINTING 1739 E GRAND AVE DM, IA 50316	CAMPAIGN CARDS	588.30
08-23-05	ID# CK#	CHASE PO BOX 94014 PALATINE, IL 60094	GAS-TRAVELING FOR CAMPAIGN & CAMPAIGN MEETINGS	313.17
SUB-TOTAL				\$ 2279.82
<b>TOTAL (if last page of this schedule)</b>				\$

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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)  
COMMITTEE TO ELECT MICHAEL A. MAURO

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
06-12-05	ID# CK#	LATIN KING 2200 HUBBELL AVE DM, IA 50317	POLK COUNTY DEMOCRATS MEETING	\$ 24.93
06-20-05	ID# CK#	CHASE PO BOX 94017 PALTINE, IL 60094	GAS - TRAVELING FOR CAMPAIGN & CAMPAIGN MEETINGS	207.35
06-22-05	ID# CK#	ALEXANDERS PHOTO 3313 INGERSOLL AVE DM, IA 50312	CAMPAIGN PICTURES	157.94
06-25-05	ID# CK#	IA CO. DEM. CENTRAL COMM 200 W MAPLE ST WILLIAMSBURG, IA 52361	CONTRIBUTION	30.00
07-07-05	ID# CK#	POSTMASTER 1164 2ND AVE DM, IA 50318	STAMPS	74.00
07-13-05	ID# CK#	CARTER PRINTING 1739 E GRAND AVE DM, IA 50316	CAMPAIGN CARDS & CAMPAIGN BUSINESS CARDS	252.28
07-18-05	ID# CK#	JAMIE FITZGERALD 3036 E DIEHL AVE DM, IA 50320	REIMBURSE FOR TONER FOR CAMPAIGN	19.07
07-19-05	ID# CK#	CARTER PRINTING 1739 E GRAND AVE DM, IA 50315	LETTERHEAD FOR CAMPAIGN	54.06
<b>SUB-TOTAL</b>				<b>\$ 819.63</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$</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

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**COMMITTEE NAME** (Must be same as on Statement of Organization)  
*Committee to Elect Michael A. Mauro*

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
04-12-05	ID# CK#	BLANK GOLF COURSE 808 COUNTY LINE RD DM, IA	GIFT CERTIFICATE FOR AUCTION - POLK COUNTY DEMOCRATS	\$ 76.00
04-12-05	ID# CK#	POLK COUNTY DEMOCRATS PO BOX 5102 DM, IA	CONTRIBUTION	100.00
05-08-05	ID# CK#	DAHLS 3400 E 33RD ST. DM IA	POSTAGE STAMPS	111.00
05-11-05	ID# CK#	CHILDSERVE 7407 SW 14TH ST DM, IAT	CONTRIBUTION	50.00
05-15-05	ID# CK#	5TH DISTRICT DEMOCRATS	CONTRIBUTION	60.00
05-16-05	ID# CK#	CARTER PRINTING 1739 E GRAND AVE DM, IA	LETTERHEAD, ENVELOPES CAMPAIGN CARDS	175.96
06-04-05	ID# CK#	STORY CO DEMOCRATS 2800 PINEHURST CIRCLE AMES, IA	CONTRIBUTION	50.00
06-07-05	ID# CK#	IOWA DEMOCRATIC PARTY 5661 FLEUR DR DM, IA	CONTRIBUTION	200.00
<b>SUB-TOTAL</b>				<b>\$ 822.96</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$</b>

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**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
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**COMMITTEE NAME** (Must be same as on Statement of Organization)  
*Committee to Elect Michael A. Mauro*

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
01-04-05	ID# CK#	BECKY DEWEY 608 LEACH AVE DM, IA	REIMBURSE FOR RECEPTION	\$ 27.96
01-07-05	ID# CK#	BARATTA'S 2320 SO UNION DM, IA	POLK COUNTY DEMOCRATS MEETING	19.54
01-13-05	ID# CK#	BECKY DEWEY 608 LEACH AVE DM, IA	REIMBURSE FOR FRAMING CERTIFICATE	9.01
02-10-05	ID# CK#	IA CUBS CLUB 350 SW WATER ST DM, IA	CAMPAIGN MEETING	39.00
03-09-05	ID# CK#	POLK COUNTY DEMOCRATS PO BOX 5102 DM, IA	CONTRIBUTION	150.00
03-23-05	ID# CK#	SOUTH CENTRAL IA FED OF LABOR 300 E LOCUST SUITE 120 DM, IA	BANQUET	25.00
03-29-05	ID# CK#	IA SENATE MAJORITY FUND 5661 FLEUR DR DM, IA	CONTRIBUTION	26.00
03-31-05	ID# CK#	CARTER PRITING 1739 E GRAND AVE DM, IA	PRINTING NOTE CARDS	139.92
SUB-TOTAL				\$ 436.43
<b>TOTAL (if last page of this schedule)</b>				\$

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