

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

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

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

OPPORTUNITY MARION, INC.

IMPORTANT: Indicate by # type of committee you are reporting for: 1 2 3 4 5 6 7 8 9 10 11

(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	NOV 1 2005	Political Party (if applicable)
Office Sought		District (if Senate or House)

Late reports are subject to possible civil and criminal penalties.

Gene W. Nelson **Treasurer** 319-377-4891 Nov. 1, 2005
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A October 29, 2005 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR
 (report date) Indicate by # 1 2

CHECK IF AMENDMENT TO REPORT DATED _____

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

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

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed)	\$ 0.00
ADD TOTAL MONEY TAKEN IN THIS PERIOD	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see In-kind below)	3,600.00
Schedule F: Loans Received total (Attach Schedule F)	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ 3,600.00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	1,131.66
Schedule F: Loan Repayments total (Attach Schedule F)	0.00
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$ 2,468.34
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 450.00
**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 0.00
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 0.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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



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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
OPPORTUNITY MARION, INC.

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
07/18/05	ID# CK# 1378	Paul Rehn 2710 25th Avenue Marion, Iowa 52302		\$100.00	<input type="checkbox"/>
07/21/05	ID# CK# 2126176	Vector Corporation 675 44th Street Marion, Iowa 52302		250.00	<input type="checkbox"/>
07/26/05	ID# CK# 1432	Victor Klopfenstein 5540 Hunters Ridge Ct. Marion, Iowa 52302		100.00	<input type="checkbox"/>
08/02/05	ID# CK# 9093	David Kalkwarf 1175 18th Street Marion, Iowa 52302		75.00	<input type="checkbox"/>
08/02/05	ID# CK# 2745	Craig Adamson 1000 lindale Drive Marion, Iowa 52302		100.00	<input type="checkbox"/>
08/02/05	ID# CK# N/A	Steve Jcnscn 3830 Monarch Avenue Marion, Iowa 52302		100.00	<input type="checkbox"/>
08/29/05	ID# CK# 1603	Kim Nelson 2745 Clubhouse Drive Marion, Iowa 52302		100.00	<input type="checkbox"/>
08/30/05	ID# CK# 853	Marion Economic Development Corp. 790 11th Street Marion, Iowa 52302		500.00	<input type="checkbox"/>
09/02/05	ID# CK# 9122	David Etzcl 3405 Park Crest Ct. Marion, Iowa 52302		25.00	<input type="checkbox"/>
09/22/05	ID# CK# 3280	BBAK Investments LTD 220 35th Street Marion, Iowa 52302		250.00	<input type="checkbox"/>

SUB-TOTAL \$ 1600.00

TOTAL (If last page of this schedule) \$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form



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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
 OPPORTUNITY MARION, INC.

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
09/23/05	ID# CK# 39081	Farmers State Bank 1240 8th Avenue Marion, Iowa 52302		\$400.00	<input type="checkbox"/>
10/05/05	ID# CK# 2266	Gary Warner 4223 F Avenue NE Cedar Rapids, Iowa 52402		50.00	<input type="checkbox"/>
10/13/05	ID# CK# 7841	Tamara Danover 2950 Newcastle Rd. Marion, Iowa 52302		100.00	<input type="checkbox"/>
10/13/05	ID# CK# 23571	Heritage Bank 695 Marion Blvd. Marion, Iowa 52302		150.00	<input type="checkbox"/>
10/13/05	ID# CK# 1014	Guardian Bldg. Dist. 6301 N. Gateway Drive Marion, Iowa 52302		100.00	<input type="checkbox"/>
10/13/05	ID# CK# 45502	Marion Mixers, Inc 3575 3rd Avenue Marion, Iowa 52302		250.00	<input type="checkbox"/>
10/13/05	ID# CK# 12309	Mark Long 4750 Hickory Wind Lane Marion, Iowa 52302		200.00	<input type="checkbox"/>
10/13/05	ID# CK# 98648	Rapids Wholesale Equipment 6201 S. Gateway Drive Marion, Iowa 52302		200.00	<input type="checkbox"/>
10/17/05	ID# CK# 1848	Fiber Utility Network, LLC 4970 Lakeside Road Marion, Iowa 52302		450.00	<input type="checkbox"/>
10/20/05	ID# CK# N/A	Snooks Buska 2100 7th Avenue Marion, Iowa 52302		100.00	<input type="checkbox"/>

SUB-TOTAL

\$ 2000.00

TOTAL (if last page of this schedule)

\$ 3600.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM



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

COMMITTEE NAME (Must be same as on Statement of Organization)
OPPORTUNITY MARION, INC.

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
09/16/05	ID# CK# 001	Huk Printing 1075 44th Street Marion, Iowa 52302	Printing of brochures/flyers	\$ 575.46
09/16/05	ID# CK# 002	Information Services 1355 Sherman Rd., Suite 601 Hiawatha, Iowa 52233	Website domain name & setup	50.00
10/28/05	ID# CK# 003	Printfinder 309 Court Avenue, Suite 213 Des Moines, Iowa 50309	Print postcards	506.20
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1131.66

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

COMMITTEE NAME (Must be same as on Statement of Organization)
OPPORTUNITY MARION, INC.

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.



**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
 (DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period, regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/20/05	The Marion Times 808 6th Street Marion, Iowa 52302	Advertisement	\$ 450.00 <i>Estimate</i>
SUB-TOTAL			\$
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 450.00

*If actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:
 *Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.