

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 12/2005)	DISCLOSURE REPORT
For Office Use Only	
Comm. # _____	Logged In _____
Scanned _____	Computer _____
Audited _____	
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12 th , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-3701	

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

Marred for Supervisor Campaign

IMPORTANT: Indicate by # type of committee you are reporting for:

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
 Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC
 (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name: Robert G. Marneel Political Party (if applicable): No Party

Office Sought: County Supervisor District (if Senate or House): _____

Stamp: IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD, JAN 13 2007 PM 1:10:07 FILED

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.

Stephen P. Wenz - Treas. 641-737-2566 1-8-07
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A Jan 19, 2007 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 MITCHELL

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.)	\$	<u>1208.95</u>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)		<u>75.00</u>
Schedule F: Loans Received total (Attach Schedule F)		<u>0.00</u>
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		<u>0.00</u>
<u>(Schedule H applies to Candidates' Committees Only)</u>		
SUB-TOTAL	\$	<u>1283.95</u>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		<u>1283.95</u>
Schedule F: Loan Repayments total (Attach Schedule F)		<u>0.00</u>
CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)	\$	<u>0.00</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	<u>0.00</u>
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$	<u>4441.97</u>
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$	<u>0.00</u>
CONSULTANT BREAKDOWN (Schedule G Attached?)	<u>NA</u> YES _____ NO _____	
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	<u>0.00</u>

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)
Marnell for Supervisor Campaign

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.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10-15-06	ID# CK#	Dean & Bonnie Theis 3790 Walnut Ave. Osage, IA 50461		\$ 25.00	
10-25-06	ID# CK#	Jerome & Sandra Koenigs 2980 480th St McIntire, IA 50455-8102		\$ 50.00	
	ID# CK#				

SUB-TOTAL \$ 75.00
 TOTAL (if last page of this schedule) \$ 75.00

* 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)
Murrell for Supervisor Campaign

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
11-14-06	ID# CK# 1004	The Monitor Review Bx 236 Stacyville, IA 50476	Newspaper Ad's	\$ 126. ⁰⁰
12-30-06	ID# CK# 1005	The Monitor Review Bx 236 Stacyville, IA 50476	newspaper Ad's	\$ 42. ⁰⁰
1-8-07	ID# CK# 1006	Robert G. Murrell 2375 Hwy 218 Osage, IA 50461	Paid to cover portion of previous reporting period Schedule D expenses.	\$ 1115. ⁹⁵
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1283.95

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).)

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Murrell for Supervisor Campaign

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
8-15-06	Robert G. Murrell 2375 Highway 218 Osage, IA 50461	self	Osage - IA US Postal Service	\$ 39.00	
10-16-06		self	US Postal Service Stacyville, IA	21.45	
10-16-06		self	US Postal Service Orchard, IA	23.40	
10-23-06		self	US Postal Service Osage, IA	117. ⁰⁰	
10-30-06		self	US Postal Service Osage, IA	156. ⁰⁰	
11-1-06		self	US Postal Service Osage, IA	39.00	
8-27-06		self	Printer paper Sam's Club Rochester, MN	16.52	
8-27-06		self	ink cartridges SAM'S Club Rochester, MN	77. ⁴²	
8-28-06		self	stencils Hardware Hank Osage, IA	7.48	
8-29-06		self	stencils ACE Hardware Charles City, IA	6.41	
SUB-TOTAL				\$ 503.68	
TOTAL (if last page of this schedule)				\$	

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SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Marzell for Supervisor Campaign

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
8-29-06	Robert G. Marzell 2875 Highway 218 Osage, IA 50461	self	paint roller covers Fleet Farm Mason City, IA	\$ 53.24	
9-02-06		self	brushes & rollers Hardware Hank Osage IA	13.66	
9-03-06		self	paint & brushes Hardware Hank Osage, IA	6.79	
9-9-06		self	paint Fleet Farm Mason City, IA	15.75	
9-27-06		self	paint Fleet Farm Mason City, IA	5.97	
10-06-06		self	ink cartridges Stapler Mason City, IA	112.81	
10-06-06		self	paint roller cover Fleet Farm Mason City, IA	13.45	
10-14-06		self	paint True Value Riceville, IA	8.55	
10-19-06		self	printer paper Davis paint & Radio Shack Osage IA	8.55	
10-19-06		self	masking Tape Hardware Hank Osage, IA	7.27	

SUB-TOTAL \$ 246.04

TOTAL (if last page of this schedule) \$

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SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Marrell for Supervisor Campaign

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10-23-06	Robert G. Marrell 2375 Highway 218 Osage, IA 50461	Self	ink cartridges TARGET Mason City, IA	\$ 103.98	
10-23-06	↓	self	paint brush Fleet Farm Mason City, IA	0.83	
10-30-06		self	ink cartridges Davis Paint & Radio Shack Osage, IA	42.78	
10-31-06		self	envelopes Dollar General Osage, IA	5.35	
10-15-06 thru 11-7-06		self	mileage 1749 miles x .445	778.31	
1-8-07		self	forgiven debt from previous reporting period Sch. D. expenses	761.00	
1-8-07		self	forgiven loan	2000.00	

SUB-TOTAL	\$ 3692.25
TOTAL (if last page of this schedule)	\$ 4441.97

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Reset Form

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

COMMITTEE NAME (Must be same as on Statement of Organization)
Marrell for Supervisor Campaign

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 2000⁰⁰

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

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

TOTAL (PART I) \$ 0.00

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

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

TOTAL CASH REPAYMENTS (PART II) \$ 0.00
 From Schedule E -- TOTAL LOANS FORGIVEN \$ 2000⁰⁰
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0.00

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