

DISCLOSURE SUMMARY PAGE



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)

COMMITTEE TO ELECT JENNIFER OLSEN

IMPORTANT: Indicate by # type of committee you are reporting for: to
 (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: JENNIFER OLSEN Political Party (if applicable): _____
 Office Sought: ALDERMAN - DAVENPORT - 4TH WARD District (if Senate or House): _____
 NOV 7 2005

Late reports are subject to possible civil and criminal penalties.

 903-326-4297 11/3/05
 SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A NOVEMBER 3, 3005 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
Novemehr 8, 2005
 County & Local Committees, enter County in which Election is held
scott

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)	3,740.00
Schedule F: Loans Received total (Attach Schedule F)	300.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H)	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
SUB-TOTAL	\$ 4,040.00
SUBTRACT TOTAL MONEY SPENT THIS PERIOD	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)	3,296.48
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)	\$ <u>743.52</u>
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$ 0.00
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)	\$ 4,380.01
**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)	\$ 300.00
CONSULTANT BREAKDOWN (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO
CANDIDATE COMMITTEES ONLY:	
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$ 0.00

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)
COMMITTEE TO ELECT JENNIFER OLSEN

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
7/3/05	ID# CK# X	Grace Haller 1015 West 17th St. Davenport, Iowa		\$50.00	<input checked="" type="checkbox"/>
7/23/05	ID# CK# X	Pat Egly 701 Iowa St. Davenport, Iowa 52803		\$25.00	<input checked="" type="checkbox"/>
7/23/05	ID# CK# X	Gary Buckley 1027 North Pine St. Davenport, Iowa 52803		\$25.00	<input checked="" type="checkbox"/>
7/23/05	ID# CK# X	Sue Miller 1030 West 15th St. Davenport, Iowa 52804		\$50.00	<input checked="" type="checkbox"/>
7/23/05	ID# CK# X	Joanna Graller 1012 West 15th St. Davenport, Iowa 52804		\$25.00	<input checked="" type="checkbox"/>
7/23/05	ID# CK# X	Audrey Linville 1127 West 15th St. Davenport, Iowa 52804		\$10.00	<input checked="" type="checkbox"/>
8/28/05	ID# CK# X	Cathy Hermes 2307 Grove St. Davenport, Iowa 52804		\$25.00	<input checked="" type="checkbox"/>
8/25/05	ID# CK# X	Jim and Jennifer Lanphere 2623 East Geirge Washington Davenport, Iowa 52804	Inlaws	\$75.00	<input checked="" type="checkbox"/>
8/28/05	ID# X CK#	Robert Keegan 623 South Clark Davenport, Iowa 52804		\$50.00	<input checked="" type="checkbox"/>
8/28/05	ID# X CK#	Betsey and Rick Sherman 4931 Torrey Pine Court Davenport, Iowa 52806		\$50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 385	
TOTAL (if last page of this schedule)				\$	

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

For Instructions, See Back of Form

Reset Form

SCHEDULE 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)
COMMITTEE TO ELECT JENNIFER OLSEN

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
7/26/05	ID# CK# X	Mike Liebke 111 East 3rd St. Davenport, Iowa		\$200.00	<input type="checkbox"/>
7/28/05	ID# CK# X	James Sothman 2502 Davie Street Davenport, Iowa 52804		\$50.00	<input type="checkbox"/>
6/26/05	ID# CK# X	Rex and Jan Whitmore 1014 West 15th St. Davenport, Iowa 52804		\$50.00	<input type="checkbox"/>
6/30/05	ID# CK# X	James Triner Greenwich St. New York, NY	brother	\$250.00	<input type="checkbox"/>
7/5/05	ID# CK# X	Pat Trakselis 459 Longcommon Rd. Riverside, IL 60546		\$25.00	<input type="checkbox"/>
7/5/05	ID# CK# X	Deb Coonts 1116 West 16th St. Davenport, Iowa 52804		\$75.00	<input type="checkbox"/>
7/23/05	ID# CK# X	Wertner and Viletta Ernst 1012 West 16th St. Davenport, Iowa 52804		\$10.00	<input checked="" type="checkbox"/>
7/23/05	ID# CK# cash	Julie Malake West 13th St. Davenport, Iowa 52804		\$20.00	<input checked="" type="checkbox"/>
7/23/05	ID# cash CK#	Pam Cole West 17th St. Davenport, Iowa 52804		\$20.00	<input checked="" type="checkbox"/>
7/22/05	ID# cash CK#	Jerry Ferhback Davenport, IA 52804		\$20.00	<input type="checkbox"/>

SUB-TOTAL

\$ 720.00

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)
 COMMITTEE TO ELECT JENNIFER OLSEN

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
8/28/05	ID# CK# X	Gary and Linda VanHese 910 Myrtle St. Davenport, Iowa 52804		\$10.00	<input checked="" type="checkbox"/>
8/28/05	ID# CK# cash	Larry Skola Davenport, Iowa 52804		\$20.00	<input checked="" type="checkbox"/>
8/27/05	ID# CK# X	Patty and Tom Mitchell Dover, PA	Inlaws	\$100.00	<input type="checkbox"/>
10/7/05	ID# CK# X	Mike Meloy 30 Oakbrook Place Bettendorf, Iowa 52722		\$150.00	<input type="checkbox"/>
9/9/05	ID# CK# X	Jeff Heuer 5401 Victoria Ave. Davenport, Iowa		\$100.00	<input type="checkbox"/>
10/22/05	ID# CK# X	Carrie Coyle 125 Kirkwood Blvd. Davenport, Iowa 52803		\$50.00	<input type="checkbox"/>
10/27/05	ID# CK# X	Mike Guidici Davenport, Iowa 52804		\$100.00	<input type="checkbox"/>
10/15/05	ID# CK# cash	Jim Stolley 2867 Cedar St. Davenport, Iowa 52804		\$10.00	<input type="checkbox"/>
9/1/05	ID# cash CK#	Larry Rayls North Gaines St. Davenport, Iowa		\$50.00	<input type="checkbox"/>
10/24/05	ID# X CK#	Cathy Lybarger 5437 54 Avenue Court Bettendorf, Iowa 52722		\$100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 690	
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)
COMMITTEE TO ELECT JENNIFER OLSEN

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
8/28/05	ID# CK# X	Barb and Rob Lipnick 2320 Fulton Ave. Davenport, Iowa 52806		\$75.00	<input checked="" type="checkbox"/>
8/28/05	ID# CK# X	Bruce Kenaday 2632 North Clark St. Davenport, Iowa 52804		\$25.00	<input checked="" type="checkbox"/>
8/28/05	ID# CK# X	Tom and Sheri Carnahan 2007 Emerald Drive Davenport, Iowa 52803		\$25.00	<input checked="" type="checkbox"/>
8/28/05	ID# CK# X	Paula and Jim Severe 10 Elmwood Drive Blue Grass, Iowa		\$25.00	<input checked="" type="checkbox"/>
8/28/05	ID# CK# X	Marge and John Copson 2173 Hidden Valley Drive Naperville, IL	parents	\$300.00	<input checked="" type="checkbox"/>
8/28/05	ID# CK# X	James Wolf 3200 North Lakeshore Drive Chicago, IL	uncle	\$100.00	<input checked="" type="checkbox"/>
8/25/05	ID# CK# X	Alicia Gieke 2419 Scott St. Davenport, Iowa 52804		\$20.00	<input type="checkbox"/>
8/26/05	ID# CK# X	Ian Frink 2505 Fulton Ave. Davenport, Iowa 52804		\$30.00	<input type="checkbox"/>
8/11/05	ID# cash CK#	Matt Olsen 465 Nevada St. Dubuque, Iowa	Brother inlaw	\$40.00	<input type="checkbox"/>
10/15/05	ID# X CK#	Kip Olsen Belle ave. Davenport, Iowa 52806	Brother inlaw	\$20.00	<input type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule)

\$1060.⁰⁰
\$

* 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



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)
COMMITTEE TO ELECT JENNIFER OLSEN

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/19/05	ID# 8036 CK# 2547	IBEW Local #145 1700 52 Avenue St. A Moline, IL 61265		\$250.00	<input type="checkbox"/>
10/28/05	ID# CK# 1098	GROW Davenport 3111 Fernwood Ave. Davenport, Iowa 52807		\$500.00	<input type="checkbox"/>
8/27/05	ID# CK# X	Michael Walton 2805 Eastern Ave. Davenport, Iowa 52803		\$25.00	<input type="checkbox"/>
10/27/05	ID# CK# X	Michael McCarthy 701 Kahl Bldg. Davenport, Iowa 52801		\$50.00	<input type="checkbox"/>
10/28/05	ID# CK# X	James Slavens 1695 Deer Spring Circle Davenport, Iowa		\$25.00	<input type="checkbox"/>
10/28/05	ID# CK# X	Tom and Maria Waterman PO Box 258 Pleasant Valley, Iowa 52767		\$25.00	<input type="checkbox"/>
10/30/05	ID# CK# 000014	Davenport Firefighter PAC 4003 Lillie Ave. #6 Davenport, Iowa 52806		\$250.00	<input type="checkbox"/>
11/1/05	ID# CK#	Cal Werner 25370 Valley Drive Bettendorf, Iowa 52722		\$60.00	<input type="checkbox"/>
11/1/05	ID# CK#	Ed Cervantez 2430 Eagle Circle Bettendorf, Iowa 52722		\$50.00	<input type="checkbox"/>
10/30/05	ID# CK#	John Gardener 1016 Coffelt Ave. Bettendorf, Iowa 52722		\$50.00	<input type="checkbox"/>

SUB-TOTAL

\$1,285
\$3,740.00

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



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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 JENNIFER OLSEN

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
8/15/05	ID# CK#	Postmaster davenport, Iowa 52801	postage	\$ 37.00
8/22/05	ID# CK#	Robert Lelonek 2239 29th St. Rock Island, IL 61201	web page domain	\$15.00
8/22/05	ID# CK#	The Rusty Nail 2606 West Locust St. Davenport, Iowa	fundraiser food and drink	\$350.00
8/24/05	ID# CK#	Jennifer Olsen 101 West 15th Street Davenport, Iowa 52804	re-embursement for fundraiser deposit to Rusty Nail(food and beverage)	\$250.00
8/25/05	ID# CK#	Victory Store 5200 SW 30th St Davenprt, Iowa	Large yard sign	\$58.85
8/28/05	ID# CK#	Rusty Nail 2606 West Locust St. Davenport, Iowa	beverages for fundraiser	\$53.25
8/31/05	ID# CK#	Postmaster Davenport, Iowa	postage	\$29.60
9/9/05	ID# CK#	Victory Store 5200 SW 30th St. Davenport, Iowa	Yard signs and Palm Card	\$1000.00
SUB-TOTAL				\$ 1,793.70
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE 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 JENNIFER OLSEN

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
10/8/05 10/18/05	ID# CK#	Victory Store 5200 SW 30th St Davenport, Iowa	Yard signs and palm cards	\$ 629.00
9/10/05	ID# CK#	Regalia 2018 4th Ave Rock Island, IL 61201	Logo Air fresheners	\$381.26
10/29/05	ID# CK#	Office Max 320 West Kimberly Road Davenport, Iowa	Flier printing Labels	\$261.26
9/2/05	ID# CK#	Jennifer Olsen 101 West 15th Street Davenport, Iowa 52804	re-embursement for fundraiser deposit to Rusty Nail (food and beverage and room)	\$200.00
10/31/05	ID# CK#	NW Bank + Trust	account fees	\$31.26
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1,502.78
TOTAL (if last page of this schedule)				\$ 3,296.48

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

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)
COMMITTEE TO ELECT JENNIFER OLSEN



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
10/28/05	Linda VanHese 910 Myrtle St. Davenport, Iowa 52804		design time and materials for flier	\$ 150.00	<input type="checkbox"/>
8/23/05	Robert Lelonek 2239 29th St. Rock Island, IL		webpage design and maintenance	3,000.00	<input type="checkbox"/>
10/27/05	Mona Adams 21668 McCarty Creek Drive LeClaire, Iowa		time and materials for labels for mailer	300.00	<input type="checkbox"/>
9/1/05	Jennifer Olsen 1010 West 15th St. davenport, Iowa 52804	self	paper and envelopes for mailer	57.74	<input type="checkbox"/>
10/21/05	Same	self	postage	29.60	<input type="checkbox"/>
10/17/05	same	self	postage	2.67	<input type="checkbox"/>
7/23/05	Kim Reynolds 1002 West 15th St. Davenport, Iowa 52804		food for fundraiser	25.00	<input checked="" type="checkbox"/>
8/28/05	Cathryn Lass 1022 West 9th Street Davenport, Iowa 52803		Fundraiser materials	30.00	<input checked="" type="checkbox"/>
7/23/05	Jo Vandecar West 16th St. Davenport, Iowa		food for fundraiser	10.00	<input checked="" type="checkbox"/>
8/2/08	Johnny O and the Midnight Show 1010 West 15th Street Davenport, Iowa 52804		band for fundraiser	200.00	<input checked="" type="checkbox"/>

SUB-TOTAL \$ 4,305.01

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

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

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)
COMMITTEE TO ELECT JENNIFER OLSEN



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//19/05	Jennifer Olsen 1010 West 15th Street Davenport, Iowa 52804	self	envelopes and paper and postage for fundraising	\$ 75.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 75.00
 TOTAL (if last page of this schedule) \$ 4,380.01

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
 COMMITTEE TO ELECT JENNIFER OLSEN

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0



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

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD
 (Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
10/19/05	Jennifer Olsen 1010 West 15th Street Davenport, Iowa 52804	self	\$ 300.00

TOTAL (PART I) \$ 300.00

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

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

TOTAL CASH REPAYMENTS (PART II) \$ _____
 From Schedule E -- TOTAL LOANS FORGIVEN \$ _____
 TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 300.00

*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 when it applies.