FOR INSTRUCTIONS, SEE BACK OF FORM

JAN 1 9 2005

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT

For Office Use Only
Comm. # 1326
Indexed
Audited
Computer

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Oldson for State Representative

IMPORTANT: Indicate type of committee you are reporting for: 1

(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate
(5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee
(8)Support Slate of Candidates

SIGNATURE OF TREASURER (or person filing this report) — TELEPHONE 575-255-2805 — DATE SIGNED 1-17-05

Routine Penalties Due For Late Filed Reports Range from $20 to $800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A December 31, 2004 REPORT FOR AN/A (1) **ELECTION** /(2)**NON-ELECTION** YEAR.
(report date) Indicate one 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 Notice of Dissolution is filed.)

Local Committees, enter Date of Election

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

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) ..... $ 19,656.42

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 480.00

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

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

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....$ 20,136.42

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 10,663.18

Schedule F: Loan Repayments total (Attach Schedule F) .....

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) ..... $ 9473.24

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

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

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

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ____ YES ____ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $

Jo Oldson for State Representative - Schedule A

Date	PAC ID	Name	Address	Relationship	Amount
10/28/2004	ID# CK#	Applegate, William	3107 Cottonwood Dr., Waukee, IA 50263	No Relation	$100.00
10/28/2004	ID# CK#	Murphy, Larry	531 6th Street NW, Oelwein, IA 50662	No Relation	$100.00
10/29/2004	ID# CK#	Eckhart, Lynne	943 Sixth St. SE, Mason City, IA 50401	No Relation	$50.00
10/30/2004	ID# CK#	Burdette, Michael	1394 E. County Line Rd., Carlisle, IA 50047	No Relation	$100.00
10/30/2004	ID# XXXX CK# 2268	PAC #XXXX, Iowa Cable	8350 Hickman, Suite 2, Clive, IA 50325	No Relation	$100.00
11/5/2004	ID# CK#	Meehan, Judith	330 52nd St, Des Moines, IA 50312-2114	No Relation	$30.00

TOTAL **$480.00**

Sub-Total: **$480.00**

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE **B** (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Oldson for State Representative

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
10/27/04	ID# CK# 3135	Iowa Bystander 1168 22nd St. Des Moines IA 50311	newspaper ad.	$ 100.00
10/28/04	ID# CK# 3136	Chad Baker 10635 Victory Dr. Urbandale IA 50322	Copy writing for mail pieces	500.00
10/28/04	ID# CK# 3137	Brian Sauer Design 3207 49th St. Co. DSM IA 50310	art design work on mail pieces	815.00
10/29/04	ID# CK# 3138	US Postmaster	postage	111.00
11/3/04	ID# CK# 3139	Office Max Ingersoll Ave. DSM IA 50312	printing & paper	394.30
11/3/04	ID# CK# 3140	Randy Seiberling 39th & Ingersoll Ave. DSM 50312	food for election day	31.45
11/11/04	ID# CK# 3141	Direct Marketing 2130 Delaware Ave. DSM 50317	postage & processing of mail pieces	565.03
11/20/04	ID# CK# 3142	Brice Oakley 418 38th PL DSM 50312	misc. expense reimbursement - mail envelops, print labels, paper, postcards, postage	212.96
			SUB-TOTAL	$ 2729.74
			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 56.6(3)(i).)

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE **B** (Rev. 09/97)	MONETARY EXPENDITURES
☐ CHECK THIS BOX IF AMENDING 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.

COMMITTEE NAME *(Must be same as on Statement of Organization)*
Oldson for State Representative

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
11/20/04	ID# CK# 3143	Jo Oldson 418 38th Pl Dsm 50312	misc. expense reimburse food & drink for election day	$ 433.44
12/27/04	ID# CK# 3144	Ia. House Truman Fund 5661 Fleur Dr. Dsm 50321	contribution	7500.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$ 7933.44
			TOTAL *(if last page of this schedule)*	$ 10,663.18

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 56.6(3)(i).)