FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT

For Office Use Only
Comm. # 1560
Logged In
Scanned
Computer
Audited

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

COMMITTEE TO ELECT RICK OLSON TO HOUSE OF REPRESENTATIVES

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: RICK OLSON
Political Party (if applicable): DEMOCRATIC
Office Sought: HOUSE OF REPRESENTATIVES
District (if Senate or House): #68

DISCLOSURE REPORT NO
NOV - 8 2006
FILED
ND

Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF ~~PERSON~~ FILING REPORT: [signature]
TELEPHONE: 515-266-7063
DATE SIGNED: 11/8/06

I AM FILING A 10/31/06 (report date) REPORT FOR (1) **ELECTION** /(2)**NON-ELECTION** YEAR. 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

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.) ..... $ 6,476.03

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1,650.00

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.....$ 8,126.03

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)... 5650.00

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) ..... $ 2,476.03

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) $

FOR INSTRUCTIONS, SEE BACK OF FORM

SCHEDULE B (Rev. 07/03)	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)*

COMMITTEE TO ELECT RICK OLSON TO HOUSE OF REPRESENTATIVES

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
10/16/06	ID# CK# 1255	HOUSE TRUMAN FUND 1111 ARMY POST ROAD DES MOINES, IA 50305		$ 1500.00
10/24/06	ID# CK# 1256	HOUSE TRUMAN FUND 1111 ARMY POST ROAD DES MOINES IA 50305		2500.00
10/31/06	ID# CK# 1257	HOUSE TRUMAN FUND 1111 ARMY POST ROAD DES MOINES IA 50305		1650.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
			SUB-TOTAL	$
			TOTAL *(if last page of this schedule)*	$ 5650.00

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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ CHECK THIS BOX IF AMENDING FORM	

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

COMMITTEE TO ELECT RICK OLSON HOUSE OF REPRESENTATIVES

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
10/28/06	ID# 6070 CK# 3477	IOWA LAW PAC 521 E. LOCUST ST - 3RD FL DES MOINES, IA 50309		$ 1,000.00	
10/28/06	ID# CK# 103203	FRANK SANTANA 2100 N.W. 100 ST CLIVE IA 50321		500.00	
10/23/06	ID# 1560 CK# 1041	SIOUXLAND ENERGY/LIVESTOCK COOP POLITICAL ACTION COMMITTEE 3890 GARFIELD AV SIOUX CENTER IA 51250		100.00	
10/23/06	ID# 6314 CK# 533	LOCAL 4 FIRE PAC P.O BOX 1821 DES MOINES IA 50306		50.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $

TOTAL ***(if last page of this schedule)*** $ 1650.00

* 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.