FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

IA ETHICS & CAMPAIGN DISCLOSURE BOARD
JAN 18 2007
FILED

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

For Office Use Only
Comm. # 1326
Indexed S
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 State of Candidates

SIGNATURE OF TREASURER (or person filing this report) — TELEPHONE 255-2805 — DATE SIGNED 1-17-07

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 Dec. 31, 2006 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.) ..... $ 8411.29

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) 2650.00

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.....$ 11,061.29

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) 5333.61

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) ..... $ 5727.68

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
11/1/2006	ID# CK#	Conlow, Edward	4801 Observatory Rd, Des Moines, IA 50311-3330	No Relation	$50.00
11/1/2006	ID# CK#	Smith, L.T. and Margaret	4525 96th Street, Urbandale, IA 50322	No Relation	$50.00
11/1/2006	ID# CK#	Tone, John	4323 Grand Ave. #17, Des Moines, IA 50312	No Relation	$100.00
11/2/2006	ID# 6277 CK# 1296	PAC #6277, Sheet Metal Contractors of IA	1454 30th Street, Suite 201, West Des Moines, IA 50266-1312	No Relation	$100.00
11/4/2006	ID# CK#	Palmer, David	213 SW Flynn Dr., Ankeny, IA 50021	No Relation	$50.00
11/6/2006	ID# CK#	Ungs, David	22397 Asbury Road, Holy Cross, IA 52053	No Relation	$250.00
12/21/2006	ID# CK#	Ackerson, Steven	1634 NW 131st St., Clive, IA 50325	No Relation	$500.00
12/21/2006	ID# CK#	Cameron, Susan	600 Brentwood Dr., Waukee, IA 50263	No Relation	$200.00
12/21/2006	ID# CK#	Hamm, Michael	12917 Timberline Dr., Urbandale, IA 50323	No Relation	$100.00
12/21/2006	ID# CK#	Johnson, Doug	13416 Ridgeview Drive, Urbandale, IA 50323	No Relation	$100.00
12/21/2006	ID# CK#	Osthus, David	3511 132nd Court, Urbandale, IA 50323	No Relation	$150.00
12/21/2006	ID# 6067 CK# 3621	PAC #6067, Iowa Health PAC	6750 Westown Pkwy #100, West Des Moines, IA 50266	No Relation	$1,000.00

TOTAL $2,650.00

Sub-Total: $2,650.00

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 Rep.

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
11/1/06	ID# CK# 3160	House Truman Fund 5661 Fleur Dr. DSM 50321	Contribution	$ 3000.00
11/9/06	ID# CK# 3161	Direct Marketing Assoc. 2130 Delaware DSM 50317	postage & handling on mail piece	1536.08
11/15/06	ID# CK# 3162	Jo Oldson 418 38th Pl DSM 50312	reimburse for election night food & beverage	297.53
11/22/06	ID# CK# 3163	Sauer Design 3207 49th DSM 50310	design & copy on mail piece	500.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL $

TOTAL ***(if last page of this schedule)*** $ 5333.61

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)