FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

HD

IA ETHICS AND CAMPAIGN DISCLOSURE BD.

2008 MAY 19 PM 12:44

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

For Office Use Only
Comm. # 1560
Logged In S
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)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

Late reports are subject to possible civil and criminal penalties.

SIGNATURE OF PERSON FILING REPORT

515-266-7063
TELEPHONE

5/15/08
DATE SIGNED

I AM FILING A MAY 19 2008 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 _____

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.) ..... $ 8,076.03

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 1,400.00

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.....$ 9,476.03

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)... 4,000.00

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) ..... $ 5,476.03

****UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... $ -0-

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... $ -0-

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... $ -0-

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) ___ YES ✓ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) $ -0-

For Instructions, See Back of Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
☐ 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 RICK OLSON TO 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
1/8/08	ID# 6058 CK# 4177	IOWA CHIROPRACTIC SOCIETY POLITICAL ACTION COMMITTEE 1605 N ANKENY BLVD #100 ANKENY IA 50023		$ 100.00	
1/8/08	ID# 8519 CK# 3765	CHICAGO + NORTHEAST ILLINOIS DISTRICT COUNCIL OF CARPENTERS PAC 12 EAST ERIE STREET CHICAGO IL 60611		1000.00	
1/8/08	ID# CK# 1015	WILLIAM + JEANNE LEAUER 3280 CAMP CREEK ROAD LYNN CENTER, IL 61262		300.00	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID# CK#				

SUB-TOTAL $ 1400.00

TOTAL *(if last page of this schedule)* $ 1400.00

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

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 RICKOLSON 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
2/7/08	ID# CK# 1259	IOWA DEMOCRATIC PARTY 6661 FLEUR DR DESMOINES IA 50321		$ 1,000.00
2/7/08	ID# CK# 1260	HOUSE TRUMAN FUND 1111 ARMY POST RD DESMOINES IA 50305		3,000.00
3/3/08	ID# CK# N/A	BANK OF AMERICA P.O BOX 25118 TAMPA, FL 33622-5118	CHECK ENCLOSURE FEE	5.00
4/3/08	ID# CK# N/A	BANK OF AMERICA PO BOX 25118 TAMPA, FL 33622-5118	REVERSE CHECK ENCLOSURE FEE	(5.00)
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL $ 4,000.00

TOTAL ***(if last page of this schedule)*** $ 4,000.00

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).)