

# DISCLOSURE SUMMARY PAGE

FORM <b>DR-2</b> (Rev. 01/98)	DISCLOSURE REPORT
COUNTY AUDITOR For Office Use Only	
Comm. #	<u>17267-A</u>
Indexed	<u>JUL 19 PM 2:59</u>
Audited	<u>slj</u>
Computer	<u>LINN COUNTY IOWA</u>

COMMITTEE NAME (Must be same as on Statement of Organization)  
**LINDA LANGSTON FOR SUPERVISOR**

IMPORTANT: Indicate type of committee you are reporting for:  4

( 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

James J. Sires 364-0171  
SIGNATURE OF TREASURER (or person filing this report) TELEPHONE

7/19/02  
DATE SIGNED

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 JULY 14, 2002 REPORT FOR AN  (1) ELECTION / (2) ~~NON-ELECTION~~ YEAR.  
(report date) Indicate one

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  
LINN COUNTY

## 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.) .....\$ 8,007.32

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) ..... 3,846.92

Schedule F: Loans Received total (Attach Schedule F) ..... 4,000.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... 0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 15,854.24

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) ..... 9,665.54

Schedule F: Loan Repayments total (Attach Schedule F) ..... 0

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) .....\$ 6,188.70

UNPAID BILLS (From Schedule D - Attach Schedule D) .....\$ 2,188.33

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

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) .....\$ 6,000.00

**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 <b>A</b> (Rev. 06/97)	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)  
**LINDA LANGSTON FOR SUPERVISOR**

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
5/15/02	ID# CK# 4643	DR. R. L. HILL 541 AUGUSTA DR. S.E. CEDAR RAPIDS, IA 52403		\$ 25.00	
5/22/02	ID# CK# 9259	MARILYN STOECKEN 535 FOREST DR. SE CEDAR RAPIDS, IA 52403		40.00	
5/20/02	ID# CK# 11598	C. M. RICHARDSON 1010 29TH ST. NE CEDAR RAPIDS IOWA		25.00	
5/21/02	ID# CK# 7509	JOHN LAVENTY 375 EASTLAND DR. SE. CEDAR RAPIDS, IA 52403		25.00	
5/19/02	ID# CK# 3193	NANCY EVANS 2336 LINDEN DR. SE. CEDAR RAPIDS, IA 52403		250.00	
5/20/02	ID# CK# 4129	MONA KNOLL 740 E. POST CT. SE. CEDAR RAPIDS, IA 52413		50.00	
5/21/02	ID# CK# 11032	J. F. ROLAND 4272 FOX MEADOW DR. SE. CEDAR RAPIDS, IA 52403		100.00	
5/24/02	ID# CK# 3784	LYNN D. DEKOCK 2180 TIMBER CREEK DRIVE MAREEN, IA 52302		50.00	
5/24/02	ID# CK# 4243	MARY KOEHLER 1300 13TH ST N.W. APT B107 CEDAR RAPIDS, IA 52405		500.00	
5/21/02	ID# CK# 1100	ROBERT I. CARVER III 4279 FOX MEADOWS DR. CEDAR RAPIDS, IA 52403		100.00	

SUB-TOTAL

\$ 1165.00

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) (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

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 06/97)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
**LINDA LANGSTON FOR SUPERVISOR**

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DATE RECEIVED (MM/DD/YYR)	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
5/23/02	ID# CK# 2115	DELY HARRIS 3626 BEVER AVE. S.E. CEDAR RAPIDS, IA 52403		\$ 50.00	
5/27/02	ID# CK# 11914	KATHY L. HALL 4021 CHANTER OAK LANE SE CEDAR RAPIDS, IA 52403		50.00	
5/26/02	ID# CK# 5747	ROBERT J. CLANCY JR.		50.00	
6/3/02	ID# CK# 2391	CRAIG C. CAMPBELL 628 COTTAGE GROVE AVE. S.E. CEDAR RAPIDS, IA 52403		50.00	
6/6/02	ID# CK# 6238	KATHLEEN JUBA WILSON 605 27TH ST. N.E. CEDAR RAPIDS, IA 52402		50.00	
6/7/02	ID# CK# 2409	ROBERT E. DUONSKY 412 6TH ST. CORALVILLE, IA 52241		25.00	
6/9/02	ID# CK# 5184	GAMM N. DONNERMEYER 242 24TH ST DR S.E. CEDAR RAPIDS, IA 52403		50.00	
6/8/02	ID# CK# 4046	LORENNE LIABO 290 RED FOX RD S.E. CEDAR RAPIDS, IA 52403		50.00	
6/16/02	ID# CK# 7355	JAMES C. NEMMERS 2048 SUNLAND DR. S.E. CEDAR RAPIDS, IA 52403		100.00	
6/11/02	ID# CK# 1049	MANION DEMOCRATIC CLUB GORDON GIBSON, TREASURER		72.92	
SUB-TOTAL				\$ 547.92 ✓	
TOTAL (if last page of this schedule)				\$	

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For Instructions, See Back of Form

SCHEDULE <b>A</b> (Rev. 06/97)	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)  
**LINDA LANGSTON FOR SUPERVISOR**

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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
7/13/02	ID# CK# 1979	JOHN HEDGE COTH 500 HIGLEY BUILDING CEDAR RAPIDS, IA 52403		\$ 100.00	
7/13/02	ID# CK# 6054	PATRICIA M. MARSHALL 3020 CIRCLE DR. NE. CEDAR RAPIDS, IA 52412		50.00	
7/13/02	ID# CK# 1141	MARCIA ROBERS 2201 RIDGEWAY DR. SE. CEDAR RAPIDS, IA 52403		50.00	
7/13/02	ID# CK# 4544	GENE ANN JOHNSON 100 THOMPSON DR. SE. #314 CEDAR RAPIDS, IA 52403		50.00	
7/11/02	ID# CK# 2915	LYNN DENNIS 3884 NORTH FORK DR. SE. CEDAR RAPIDS, IOWA 52403		50.00	
7/7/02	ID# CK# 6023	CATHERINE C. BATY 225 CRESCENT ST SE. CEDAR RAPIDS, IA 52403		50.00	
7/8/02	ID# CK# 1828	HERMAN GINSBERG 3618 CLARK Rd. SE. CEDAR RAPIDS, IA 52403		51.00	
7/13/02	ID# CK# 1010	CRAIG C. CAMPBELL 628 COTTAGE GROVE AVE S.E. CEDAR RAPIDS, IA 52403		100.00	
7/4/02	ID# CK# 2427	JANIS L. KAZIMOUR 321 NASSAU DRIVE S.E. CEDAR RAPIDS, IA 52403		100.00	
7/1/02	ID# CK# 7004	MARJONIE BEED 137 37TH ST. N.E. CEDAR RAPIDS, IA 52402		25.00	

SUB-TOTAL \$ **626.00**

TOTAL (if last page of this schedule) \$

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For Instructions, See Back of Form

SCHEDULE <b>A</b> (Rev. 06/97)	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)  
**LINDA LANGSTON FOR SUPERVISOR**

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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
6/26/02	ID# CK# 1163	JAMES D. UNZETIG 308 ANDOVER LANE SE CEDAR RAPIDS, IA 52403		\$ 49.00	
6/25/02	ID# CK# 10107	DAVID F. UNZETIG 308 ANDOVER LANE S.E. CEDAR RAPIDS, IA 52403		49.00	
7/13/02	ID# CK# 5118	ARVIND J. DANDEKAR 2731 28TH AVE. MANSION, IA 52302		50.00	
7/13/02	ID# CK# 5630	JOHN M. ELY, JR 203 23RD ST N.E. CEDAR RAPIDS		50.00	
7/13/02	ID# CK# 3983	ORTHA R. HARSTAD 2115 1ST AVENUE S.E. APT. 3324 CEDAR RAPIDS, IA 52402		50.00	
7/13/02	ID# CK# 6825	ELIZABETH G. SCAPPEY 190 COTTAGE GROVE BLVD SE #112 CEDAR RAPIDS, IA 52403		100.00	
7/13/02	ID# CK# 8268	LILLIAN L. MCGRAW 1221 ROBINWOOD LANE NE CEDAR RAPIDS, IA 52402		100.00	
7/14/02	ID# CK# 4349	DONALD J. LINDER 2900 HUNTERS RIDGE RD. MANSION, IA 52302		100.00	
7/13/02	ID# CK# 6007	DAVID W. KUBICEK 2564 SWAN LAKE RD. N.W. CEDAR RAPIDS, IA 52317		100.00	
	ID# CK#	JEAN E. OXLEY <del>190</del> 190 COTTAGE GROVE AVE SE CEDAR RAPIDS, IA 52403		50.00	

SUB-TOTAL \$ 698.00

TOTAL (if last page of this schedule) \$

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For Instructions, See Back of Form

SCHEDULE <b>A</b> (Rev. 06/97)	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)  
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7/13/02	ID# CK# 8233	JOHN R. GALES 2132 COTTAGE GROVE MEADOWS S.E. CEDAR RAPIDS, IA 52403		\$ 75.00	
7/13/02	ID# CK# 6340	BEVERLY GALES 2132 COTTAGE GROVE MEADOWS SE CEDAR RAPIDS, IA 52403		75.00	
7/8/02	ID# CK# 9373	JEREMY J. BRIGHAM 229 23RD ST DR S.E. CEDAR RAPIDS, IA 52403		10.00	
7/11/02	ID# CK# 5644	NANCY E. WAGNER 4265 SUNLAND CT. S.E. CEDAR RAPIDS, IA 52403		35.00	
7/10/02	ID# CK# 10072	DORIS M. KELLISON 2310 4TH AVE S.E. CEDAR RAPIDS, IA 52403		25.00	
7/13/02	ID# CK# CASH	MARK FULLER		40.00	
7/13/02	ID# CK# CASH	? MISCELLANEOUS CASH DONATIONS		125.00	
7/8/02	ID# CK# 4368	MARY A. KOEHLER 1300 13TH ST N.W. APT B107 CEDAR RAPIDS		100.00	
7/12/02	ID# CK# 9311	E. G. KOLKMEIER 1222 43RD ST. SE. CEDAR RAPIDS, IA 52403		50.00	
7/13/02	ID# CK# 12000	MARSHA M. BECKELMAN 359 PLEASANT DR. S.E. CEDAR RAPIDS, IA 52403		50.00	
SUB-TOTAL				\$ 585.00	
TOTAL (if last page of this schedule)				\$	

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FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE <b>B</b> (Rev. 09/97)	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)  
**LINDA LANGSTON FOR SUPERVISOR**

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
5/15/02	ID# CK# 1006	MARKETING AND COMMUNICATION STRATEGIES 2218 FIRST AVE. NE. CEDAR RAPIDS, IA 52402	PRINT BILLING FOR LETTERHEAD, ENVELOPES, YARD SIGNS & WEBS	\$ 5,381.51
5/23/02	ID# CK# 1007	MAILING SERVICE, INC 200 50TH AVE S.W. STE B CEDAR RAPIDS, IA 52404	POSTAGE FOR MAILING	1,197.90
5/23/02	ID# CK# 1008	KMR4 1957 BLAIRS FERRY RD C.R., IA N.E.	RADIO ADS	1,000.50
5/23/02	ID# CK# 1009	KZLA 1110 26TH AVE S.W. CEDAR RAPIDS, IA	RADIO ADS	763.00
5/24/02	ID# CK# 1010	MANION TIMES 806 6TH ST MANION, IOWA	NEWSPAPER ADS	55.60
5/24/02	ID# CK# 1011	LINN NEWSLETTER 38 4TH N CENTRAL CITY, IA	NEWSPAPER ADS	56.25
5/24/02	ID# CK# 1012	<del>AF NETWORK</del> INFORMATICS 2750 1ST AVE N.E. JR 260 C.R., IA 52402	<del>NEWSPAPER ADS</del> PAYMENT TOWARD WEBSITE SET UP AND FEES	500.00
6/20/02	ID# CK# 1014	STEADMAN GRAPHICS 817 FIFTH ST S.E. CEDAR RAPIDS, IA 52401	POSTCARD PRINTING	364.64
SUB-TOTAL				\$ 9,319.40
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 INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

SCHEDULE <b>B</b> (Rev. 09/97)	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)  
**LINDA LANGSTON FOR SUPERVISOR**

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
6/29/02	ID# CK# 1015	MAILING SERVICES INC 200 50TH AVE SW. C.R., IA 52404	DATA PROCESSING	\$ 283.48
5/24/02	ID# CK# 1012	MT. VERNON SUN 113 2ND AVE NORTH MT. VERNON, IA	NEWSPAPER AD	54.00
6/18/02	ID# CK#	U.S. BANK P.O. BOX 1800 ST. PAUL, MINNESOTA	BANK CHARGES	8.66
	ID# CK#			

SUB-TOTAL \$ 346.14  
TOTAL (if last page of this schedule) \$ 9665.54

**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).)

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)  
**LINDA LANGSTON FOR SUPERVISOR**

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
 (DO NOT INCLUDE LOANS – SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
3/20/02	MARKETING AND COMMUNICATION STRATEGIES 2218 1ST AVE S.E. C.R., IA 52402	SKETCHING, DESIGNING <sup>S</sup> AND REVISIONS LOGO	1,175.00
3/11/02	LINDA LANGSTON 4257 SUNLAND CT SE. C.R. IA 52403	CAMPAIGN PHOTO EXPENSE	81.00
4/2/02	LINDA LANGSTON (SAME AS ABOVE)	VOTER DISKS INFORMATION	78.04
5/1/02	LINDA LANGSTON (SAME AS ABOVE)	ANNOUNCEMENTS, PARTY SUPPLIES, ETC	148.49
4/9/02	INFORMATICS 2750 1ST AVE N.E.	BALANCE OF \$500 PLUS MONTHLY FEES \$50/MONTH	700.00
7/11/02	ILLUSIONS FINE CONTRACTURE 1221 1ST AVE S.E. C.R., IA 52402	4X5 PRINT	5.80

SUB-TOTAL \$ **2,188.33**

TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD \$ **2,188.33**

\*If actual figure is unknown, show "estimated" beside the figure.

**CANDIDATE COMMITTEES NOTE:**  
 \*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)  
**LINDA LANGSTON FOR SUPERVISOR**

SCHEDULE <b>F</b> (Rev. 08/96)	LOANS RECEIVED & REPAID
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 2000.00

**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
5/23/02	LINDA LANGSTON 4257 SUNLAND CT. SE CEDAR RAPIDS, IA 52403	CANDIDATE	\$ 4,000

TOTAL (PART I) \$ 4000.00

**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 \$ 6000

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