

**DISCLOSURE SUMMARY PAGE**

Reset Form

*Folk*

<b>FORM DR-2</b> (Rev. 07/2004)	DISCLOSURE REPORT
<b>For Office Use Only</b>	
Comm. # _____	
Logged In _____	
Scanned _____	
Computer _____	
Audited _____	

**RECEIVED**  
HD  
JAN 19 2006

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

Langerud for Mayor

IMPORTANT: Indicate by # type of committee you are reporting for: **6**  
 ( 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 Mark K. Langerud	Political Party (if applicable)
Office Sought Mayor of Pleasant Hill	District (if Senate or House)

Late reports are subject to possible civil and criminal penalties.

*Mark K. Langerud*      *515-264-0921*      *1-18-06*  
 SIGNATURE OF PERSON FILING REPORT      TELEPHONE      DATE SIGNED

I AM FILING A January 19, 2006, 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 11/08/05
County & Local Committees, enter County in which Election is held Polk

**STATEMENT OF CASH ON HAND**

<b>CASH ON HAND</b> at the beginning of the reporting period. (Total of all funds held by the committee. This amount <b>MUST</b> 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.) .....	\$ 3,686.40
<b>ADD TOTAL MONEY TAKEN IN THIS PERIOD</b>	
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) .....	605.00
Schedule F: Loans Received total (Attach Schedule F) .....	0.00
Schedule H: Total Sales of Campaign Property (Attach Schedule H).....	0.00
<u>(Schedule H applies to Candidates' Committees Only)</u>	
<b>SUB-TOTAL</b> .....	\$ 4,291.40
<b>SUBTRACT TOTAL MONEY SPENT THIS PERIOD</b>	
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....	3,979.51
Schedule F: Loan Repayments total (Attach Schedule F).....	0.00
<b>CASH ON HAND</b> at the end of this reporting period (if final report balance must be zero) (Attach DR-3) .....	\$ 341.89
<b>**UNPAID BILLS</b> (From Schedule D - Attach Schedule D).....	\$ <u>6111.94</u>
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	\$ 0.00
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F).....	\$ 100.00
<b>CONSULTANT BREAKDOWN</b> (Schedule G Attached?)	YES <input checked="" type="checkbox"/> NO
<b>CANDIDATE COMMITTEES ONLY:</b>	
<b>VALUE OF CAMPAIGN PROPERTY</b> (From Schedule H - Attach Schedule H)	\$ 0.00

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

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**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

Langerud for Mayor

**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
10/25/05	ID# CK#	Gene Person 4592 E. Oakwood Drive Pleasant Hill, IA 50327		\$10.00	<input checked="" type="checkbox"/>
10/25/05	ID# CK#	Penni Heuermann 4990 Cypress Drive Pleasant Hill, IA 50327		50.00	<input checked="" type="checkbox"/>
10/25/05	ID# CK#	Elizabeth Cooper 4885 Copper Creek Drive Pleasant Hill, IA 50327		20.00	<input checked="" type="checkbox"/>
10/25/05	ID# CK#	Robert DeCook 1535 Springs Drive Pleasant Hill, IA 50327		50.00	<input checked="" type="checkbox"/>
10/25/05	ID# CK#	Tamie Feldmann 460 N. Hickory Blvd. Pleasant Hill, IA 50327		50.00	<input checked="" type="checkbox"/>
10/25/05	ID# CK#	Ted Dyer 447 N. Shadyview Drive Pleasant Hill, IA 50327		100.00	<input checked="" type="checkbox"/>
10/25/05	ID# CK#	Randy Van Zee 2201 York Des Moines, IA 50316		50.00	<input checked="" type="checkbox"/>
10/25/05	ID# CK#	Martha Miller 5230 Oakwood Drive Pleasant Hill, IA 50327		25.00	<input checked="" type="checkbox"/>
10/25/05	ID# CK#	Carolyn Wilkins 423 Tyler Drive Pleasant Hill, IA 50327		25.00	<input checked="" type="checkbox"/>
10/25/05	ID# CK#	Scott Henry 214 - 14th Street SW Altoona, IA 50009		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 405.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

\* 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.

For Instructions, See Back of Form

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<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<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)*  
 Langerud for Mayor

**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
12/01/05	ID# CK#	Linda Westergaard 4009 E. 23rd Street Des Moines, IA 50317		\$200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 200.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 605.00	

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FOR INSTRUCTIONS, SEE BACK OF FORM

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**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.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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
11/08/05	ID# CK# 1001	Paccheno's 4450 E. University Pleasant Hill, IA 50327	Election Return Gathering	\$ 630.00
11/08/05	ID# CK# 1003	Gay Lea Wilson 1550 Castlegar Court Pleasant Hill, IA 50327	Campaign Reimbursement Paper goods/Fundraiser	12.15
11/08/05	ID# CK# 1004	Gay Lea Wilson 1550 Castlegar Court Pleasant Hill, IA 50327	Campaign Reimbursement Office Supplies	77.36
11/08/05	ID# CK# 1005	Gay Lea Wilson 1550 Castlegar Court Pleasant Hill, IA 50327	Campaign Reimbursement Postage	2960.00
11/08/05	ID# CK# 1014	Goodrell Middle School 3300 E. 29th Des Moines, IA 50317	Donation for delivery of campaign literature	300.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 3979.51</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 3979.51</b>

**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).)

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)  
Langerud for Mayor

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

**Reset Form**

**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*
			\$
10/12/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Printing	516.02
10/14/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Copies for handouts	21.20
10/19/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Printing	902.04
10/22/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Paint for Signs	33.52
10/25/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Advertising	1,515.00
10/26/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Printing	1,514.36
SUB-TOTAL			\$ 4,502.14
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			\$

\*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.

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)  
 Langerud for Mayor

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

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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.

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

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*
10/28/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Printing	\$ 508.80
10/21/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Stencil for Signs	106.00
10/13/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Advertising	250.00
10/27/05	MARK K LANGERUD 4925 WILLOW DR PLEASANT HILL, IA 50327-2055	Advertising	745.00
<b>SUB-TOTAL</b>			<b>\$ 1,609.80</b>
<b>TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD</b>			<b>\$ 6,111.94</b>

\*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.

**Reset Form**

SCHEDULE <b>F</b> (Rev. 07/03)	<b>LOANS RECEIVED &amp; REPAID</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

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

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

**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD** \$ 100.00

**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
			\$

TOTAL (PART I) \$ \_\_\_\_\_

**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) \$ 0.00  
 From Schedule E -- TOTAL LOANS FORGIVEN \$ 0.00  
**TOTAL OUTSTANDING LOANS END OF REPORT PERIOD** \$ 100.00

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