

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 07/2004)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	<u>17809</u>
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

COMMITTEE NAME (Must be same as on Statement of Organization)
 BERGAN FOR SUPERVISOR

IMPORTANT: Indicate by # type of committee you are reporting for: 5
 (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
 MICHAEL R. BERGAN

Office Sought
 COUNTY SUPERVISOR

Party (if applicable)
 REPUBLICAN

District (if Senate or House)
 District 3

Late reports are subject to possible civil and criminal penalties.

Michael R. Bergan **SIGNATURE OF PERSON FILING REPORT** 563-382-4418 **ELEPHONE** 10/15/04 **DATE SIGNED**

I AM FILING A OCTOBER 14, 2004 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 WINNESHIEK

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.) \$ 0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below) 750.01

Schedule F: Loans Received total (Attach Schedule F) 1,000.00

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

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 1,750.01

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).... 1,632.13

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) \$ 117.88

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 870.48

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 178.07

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 1,000.00

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?) YES NO

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

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SCHEDULE A (Rev. 07/03)		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)
BERGAN 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
07/28/04	ID# CK# 4861	ALBERT R. ANDERSON 2276 MIDDLE CALMAR RD DECORAH, IA 52101	UNCLE	\$100.00	<input type="checkbox"/>
09/21/04	ID# 9195 CK# 929	WINNESHIEK COUNTY REPUBLICAN C. C. 2575 GROUSE VALLEY RD DECORAH, IA 52101		250.00	<input type="checkbox"/>
10/03/04	ID# CK# CASH	DONNA BERGAN 1799 VALDRES RD DECORAH, IA 52101	PARENT	50.00	<input type="checkbox"/>
10/04/04	ID# CK# 3518	LES ASKELSON 908 PINE RIDGE CT DECORAH, IA 52101		150.00	<input type="checkbox"/>
10/12/04	ID# CK# 1433	MARION L. BEATTY 1203 SKYLINE DR DECORAH, IA 52101		30.00	<input type="checkbox"/>
10/12/04	ID# CK# CASH	MARION L. BEATTY 1203 SKYLINE DR DECORAH, IA 52101		20.01	<input type="checkbox"/>
10/12/04	ID# CK# 1477	JAMES BURNS 406 CENTER AVE DECORAH, IA 52101		50.00	<input type="checkbox"/>
10/14/04	ID# CK# 4714	FREDERIC A. CARLSON 1001 RIDGEWOOD DR DECORAH, IA 52101		50.00	<input type="checkbox"/>
10/14/04	ID# CK# 6071	FLOYD S. PEARSON 503 HILLCREST DR DECORAH, IA 52101		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 750.01	
TOTAL (if last page of this schedule)				\$ 750.01	

* 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.

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	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)
BERGAN 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
10/04/04	ID# CK#996	CALMAR COURIER PO BOX 507 CALMAR, IA 52132	ADVERTISING	\$ 400.00
10/04/04	ID# CK#997	DECORAH NEWSPAPERS PO BOX 350 DECORAH, IA 52101	ADVERTISING	250.80
10/04/04	ID# CK#998	COPYLAND 224 W WATER ST DECORAH, IA 52101	PRINTING	55.63
10/05/04	ID# CK#999	COPYLAND 224 W WATER ST DECORAH, IA 52101	PRINTING	25.15
10/05/04	ID# CK#1000	POSTMASTER 401 CLAIBORNE DECORAH IA 52101	POSTAGE	81.40
10/05/04	ID# CK#1001	WAL-MART 1798 OLD STAGE RD DECORAH, IA 52101	ENVELOPES, COPY PAPER	51.03
10/07/04	ID# CK#1002	ANUNDSEN PUBLISHING CO. 108 WASHINGTON ST DECORAH, IA 52101	ENVELOPES	14.98
10/08/04	ID# CK#1003	POSTMASTER 401 CLAIBORNE DECORAH, IA 52101	POSTAGE	111.00
SUB-TOTAL				\$ 989.99
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 68A.402(3)(i).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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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)
BERGAN 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
10/08/04	ID# CK#1004	ANUNDSEN PUBLISHING CO 108 WASHINGTON ST DECORAH IA 52101	ENVELOPES	\$ 22.47
10/08/04	ID# CK#1005	WAL-MART 1798 OLD STAGE RD DECORAH, IA 52101	ENVELOPES, BUSINESS CARDS	38.20
10/08/04	ID# CK#1006	COPYLAND 224 W. WATER ST. DECORAH, IA 52101	PRINTING	142.87
10/09/04	ID# CK#1007	K & S FOODS CENTRUM PLAZA DECORAH, IA 52101	POSTAGE	37.00
10/09/04	ID# CK#1008	WAL-MART 1798 OLD STAGE RD DECORAH, IA 52101	ENVELOPES	6.36
10/12/04	ID# CK#1009	POSTMASTER LOCAL SPILLVILLE, IA 52168	POSTAGE	37.00
10/12/04	ID# CK#1010	STOREY KENWORTHY 1014 S. MILL ST. DECORAH, IA 52101	ENVELOPES	7.44
10/12/04	ID# CK#1011	ANUNDSEN PUBLISHING CO 108 WASHINGTON DECORAH, IA 52101	ENVELOPES	21.83
SUB-TOTAL				\$ 313.17
TOTAL (if last page of this schedule)				\$

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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).)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

SCHEDULE B (Rev. 07/03)	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)
BERGAN 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
10/12/04	ID# CK#1012	POSTMASTER 401 CLAIBORNE DECORAH, IA 52101	POSTAGE	\$ 222.00
10/12/04	ID# CK#1013	COPYLAND 224 W WATER ST DECORAH, IA 52101	PRINTING	87.84
10/12/04	ID# CK#1014	WAL-MART 1798 OLD STAGE RD DECORAH, IA 52101	ENVELOPES, PAPER	19.13
	ID# CK#			
SUB-TOTAL				\$ 328.97
TOTAL (if last page of this schedule)				\$ 1,632.13

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).)

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 BERGAN FOR SUPERVISOR

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SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
03/23/04	MICHAEL R. BERGAN 1796 LINCOLN HWY RD DECORAH, IA 52101	SELF	VOTER LIST FROM IA SEC. OF STATE	\$ 62.11	<input type="checkbox"/>
06/01/04	MICHAEL R. BERGAN 1796 LINCOLN HWY RD DECORAH, IA 52101	SELF	ADVERTISING DECORAH NEWSPAPER	34.20	<input type="checkbox"/>
06/01/04	MICHAEL R. BERGAN 1796 LINCOLN HWY RD DECORAH, IA 52101	SELF	ADVERTISING CALMAR COURIER	10.00	<input type="checkbox"/>
08/26/04	MICHAEL R. BERGAN 1796 LINCOLN HWY RD DECORAH, IA 52101	SELF	SUBSCRIPTION CALMAR COURIER	20.00	<input type="checkbox"/>
10/03/04	MICHAEL R. BERGAN 1796 LINCOLN HWY RD DECORAH, IA 52101	SELF	SUPPLIES WAL-MART	29.82	<input type="checkbox"/>
10/07/04	MICHAEL R. BERGAN 1796 LINCOLN HWY RD DECORAH, IA 52101	SELF	PRINTING COPYLAND	21.94	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 178.07	
TOTAL (if last page of this schedule)				\$ 178.07	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind 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.



COMMITTEE NAME (Must be same as on Statement of Organization)
BERGAN FOR SUPERVISOR

SCHEDULE
F
 (Rev. 07/03) **LOANS RECEIVED & REPAYED**

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

CHECK THIS BOX IF AMENDING FORM

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 0

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.)

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD
 (Loans forgiven must be reported on Schedule E -- In-Kind Contributions.)

DATE RECEIVED (MM/DD/YYR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
10/03/04	MICHAEL R. BERGAN 1796 LINCOLN HWY RD DECORAH, IA 52101	SELF	\$ 700.00
10/12/04	MICHAEL R. BERGAN 1796 LINCOLN HWY RD DECORAH, IA 52101	SELF	\$ 300.00

DATE PAID (MM/DD/YYR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL (PART I) \$ 1,000.00

TOTAL CASH REPAYMENTS (PART II) \$ 0

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,000.00

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