



CAMPAIGN FINANCIAL DISCLOSURE REPORT
SUMMARY PAGE
(Please Print or Type)

Section I

Name of Candidate or Political Committee and Chairperson LENORE HARDY BARRETT		Office Sought (if candidate) Representative	District (if any) 35B
Mailing Address <input type="checkbox"/> Check if address change. P.O. Box 347	City and Zip Challis 83226	Home Phone 208-879-2797	Work Phone same
Name of Political Treasurer Lenore Hardy Barrett			
Mailing Address <input type="checkbox"/> Check if address change. same as above	City and Zip	Home Phone	Work Phone

Section II

TYPE OF REPORT

Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the instructional manual for reporting periods and due dates.

This report is for the period from 11 / 13 / 04 through 12 / 31 / 04

- | | | |
|---|---|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report | <input type="checkbox"/> 30 Day Post-Primary Report | <input type="checkbox"/> October 10 Pre-General Report |
| <input type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> 30 Day Post-General Report | <input checked="" type="checkbox"/> Annual Report |
| <input type="checkbox"/> Semi-Annual Report (Statewide Candidates Only) | | |

Is this Report an amendment? Yes No Is this a Termination Report? Yes No

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below, fill in the appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

I hereby certify that I have received no contributions and have made no expenditures during this reporting period from _____/_____/_____ through _____/_____/_____.

Section IV

SUMMARY

To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ <u>XXXXXX</u>	\$ <u>3112.98</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>1943.24</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>200.00</u>	\$ <u>9274.98</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>2143.24</u>	\$ <u>12386.98</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>558.95</u>	\$ <u>10802.69</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>1584.29</u>	\$ <u>1584.29</u>
Line 7: Outstanding Debt to Date	\$ _____	

*This same figure should be entered on line 1 of all reports filed this calendar year.

**You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period.

Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

CO JAN 27 PM 4:5
 STATE OF IDAHO
 CLERK OF COURTS

Return This Report To:
Ben Ysursa
 Secretary of State
 PO Box 83720
 Boise ID 83720-0080
 phone: (208) 334-2852
 fax: (208) 334-2282

Section V

CERTIFICATION

I Lenore Hardy Barrett (name of Political Treasurer), hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Lenore Barrett

 Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee Lenore Hardy Barrett	Report Covering the Period From <u>11/03/04</u> to <u>01/31/05</u>
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>0</u>	Total Amount \$ <u>0</u>
UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>12</u>	Total Amount \$ <u>173.25</u>

	Total This Period
<u> </u> Number of Schedule A pages Attached	1
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 0
Itemized Contributions (total all Schedule A sheets)	\$ 200.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 200.00
<u> </u> Number of Schedule B pages Attached	1
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 173.25
Itemized Expenditures (total all Schedule B sheets)	\$ 385.70
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 558.95
<u> </u> Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$
Payment this Period (Total all C-2Bs - Payment this Period)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$
<u> </u> Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$

SCHEDULE A
ITEMIZED CONTRIBUTIONS
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee
Lenore Hardy Barrett

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
12 / 04 / 04	1. Workcare Northwest, Inc. 2404 Bank Dr. Suite 302 Boise, ID 83705	\$ 50.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
12 / 04 / 04	2. Advantage Workers Compensation Insurance Co. P.O. Box 571918 SLC, UT 84157-1918	\$ 50.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
12 / 04 / 04	3. Employers Resource Operating Acct. 1301 S. Vista Suite 200 Boise, ID 83705	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
___ / ___ / ___	4.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
___ / ___ / ___	5.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
___ / ___ / ___	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
___ / ___ / ___	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
___ / ___ / ___	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
___ / ___ / ___	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
___ / ___ / ___	10.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
Subtotals of Columns A, B & C		\$ 200.00	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ 200.00

**SCHEDULE B
ITEMIZED EXPENDITURES**

of Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee
Lenore Hardy Barrett

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
11 / 16 / 04	1. Challis Messenger P.O. Box 405 Challis 93226	\$ 27.30	\$ _____
Purpose of Above Expenditure: Ad			
12 / 09 / 04	2. ALAS 1129 20th St. Suite 500 Washington, D.C 20036	\$ 50.00	\$ _____
Purpose of Above Expenditure: 2005-6 membership			
12 / 15 / 04	3. Recorder Gerald 519 Van Dreff St. Salmon 93467	\$ 38.40	\$ _____
Purpose of Above Expenditure: Christmas Ad Thank U			
12 / 27 / 04	4. Island Park News P.O. Box 410 Island Park 93429	\$ 90.00	\$ _____
Purpose of Above Expenditure: Christmas Ad Thank U			
01 / 06 / 05	5. Jefferson Star P.O. Box 37 Rigby 93442	\$ 60.00	\$ _____
Purpose of Above Expenditure: Christmas Ad Thank U			
01 / 01 / 05	6. Arco Advertiser P.O. Box 803 Arco 93213	\$ 34.00	\$ _____
Purpose of Above Expenditure: Christmas Ad Thank U			
01 / 01 / 05	7. American Land Foundation P.O. Box 1033 Taylor, Texas 76574	\$ 35.00	\$ _____
Purpose of Above Expenditure: Membership/donation			
12 / 31 / 04	8. Challis Messenger P.O. Box 405 Challis 93226	\$ 42.00	\$ _____
Purpose of Above Expenditure: Christmas Ad Thank U			
____ / ____ / ____	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 385.70	\$ 0
Total This Page (add columns A & B)			\$ 385.70