



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

Section I

Name of Candidate or Political Committee and Chairperson Shawn Keough		Office (Print or Type) State Senate	District (Print or Type) #1
Mailing Address P.O. Box 101	<input type="checkbox"/> Check if address change.	City and Zip Sandpoint 83864	Home Phone (Print or Type) 263-1839
Name of Political Treasurer Esther Gilchrist			
Mailing Address P.O. Box 101	<input type="checkbox"/> Check if address change.	City and Zip Sandpoint 83864	Home Phone 263-0569
			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 10 / 18 / 04 through 11 / 12 / 04

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
- 7 Day Pre-General Report 30 Day Post-General Report Annual Report
- 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>2,662.20</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>14,595.48</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>4,095.00</u>	\$ <u>31,379.28</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>18,690.48</u>	\$ <u>34,041.48</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>8,737.57</u>	\$ <u>24,088.57</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>9,952.91</u>	\$ <u>9,952.91</u>
Line 7: Outstanding Debt to Date	\$ <u>0.00</u>	

*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.

Section V

CERTIFICATION

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

Esther Gilchrist

Signature of Political Treasurer

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

DETAILED SUMMARY PAGE

Name of Candidate or Committee Shawn Keough	Report Covering the Period From 10 - 18 - 04 to 11 - 12 - 04
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number	15
Total Amount \$	595.00
UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number	3
Total Amount \$	30.43

	Total This Period
<u>2</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 595.00
Itemized Contributions (total all Schedule A sheets)	\$ 3,500.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 4,095.00
<u>4</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 30.43
Itemized Expenditures (total all Schedule B sheets)	\$ 8,707.14
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0.00
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 8,737.57
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)	= \$
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 Shawn Keough
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		Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
10 / 25 / 04	1. Avista Corporation P.O. Box 3727 Spokane, WA 99220	\$ 300.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 300.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
20 / 21 / 04	2. Miller Brewing Company c/o Connolly & Snyder, 134 S. 5th Boise, ID 83702	\$ 200.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 21 / 04	3. Home PAC P.O. Box 190588 Boise, ID 83718	\$ 300.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 300.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 21 / 04	4. Ceda-Pine Veneer P.O. Box 536 Post Falls, ID 83554	\$ 500.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 500.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 21 / 04	5. Basic PAC, Dr. Randy Lee, Treasurer 700 N. Raymond Boise, ID	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 100.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 23 / 04	6. Nelson Trucking P.O. Box 625 Priest River, ID 83856	\$ 500.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 500.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 23 / 04	7. Idaho Milk PAC P.O. Box 2751 Boise, ID 83701	\$ 150.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 150.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 29 / 04	8. Idaho Health Care Association 802 W. Bannock, Suite 304 Boise, ID 83702	\$ 300.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 300.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 29 / 04	9. Independence Day Safety Council PAC 16526 Shore Drive, N.E. Lake Forest Park, WA 98755-5631	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 100.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ 2,450.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 2,450.00

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

Name of Candidate or Committee
Shawn Keough

		Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
11 / 1 / 04	1. McFarland Cascade P.O. Box 1496 Tacoma, WA 98401-1496	\$ 250.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 250.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11 / 1 / 04	2. Moneytree, Inc. 6720 Fort Dent Way, Suite 230 Seattle, WA 98188	\$ 250.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 250.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11 / 1 / 04	3. Monsanto Company 800 N. Lindbergh St. Louis, MO 63167	\$ 250.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 250.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11 / 1 / 04	4. The River Journal Box 1574 Noxon, MT 59853	\$ _____	\$ 100.00	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ 100.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11 / 5 / 04	5. Regence Blue Shield P.O. Box 1106 Lewiston, ID 83501	\$ 200.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
_ / _ / _	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
_ / _ / _	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
_ / _ / _	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
_ / _ / _	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ 950.00	\$ 100.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 1,050.00

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee Shawn Keough
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		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10 / 18 / 04	^{1.} Committee to Elect Joe Stegner 216 Prospect Blvd. Lewiston, ID 28544	\$ 500.00	\$
Purpose of Above Expenditure: Donation			
10 / 18 / 04	^{2.} Committee to Elect Eric Anderson 28544 Highway 57 Priest Lake, ID 83856	\$ 900.00	\$
Purpose of Above Expenditure: Donation			
10 / 18 / 04	^{3.} Committee to Elect Joyce Broadsword 590 Health Lake Road Sagle, ID 83860	\$ 900.00	\$
Purpose of Above Expenditure: Donation			
10 / 19 / 04	^{4.} The River Journal Box 1574 Noxon, MT 59853	\$ 129.00	\$
Purpose of Above Expenditure: Advertising			
10 / 21 / 04	^{5.} Postmaster Sandpoint, ID 83864	\$ 74.00	\$
Purpose of Above Expenditure: Postage Stamps			
10 / 21 / 04	^{6.} Bonner County Republican Central Committee c/o 720 Upper Syringa Heights Sandpoint, ID 83864	\$ 1,000.00	\$
Purpose of Above Expenditure: Get Out The Vote Support			
Subtotals of Columns A & B		\$ 3,503.00	\$ 0.00
Total This Page (add columns A & B)			\$ 3,503.00

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee Shawn Keough

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10 / 23 / 04	^{1.} Bonner County Republican Central Committee c/o 720 Upper Syringa Heights Sandpoint, ID 83864	\$ 1,000.00	\$ _____
Purpose of Above Expenditure: Get Out The Vote Support			
10 / 25 / 04	^{2.} Boundary County Republican Central Committee c/o HCR 61 Box 2023 Bonners Ferry, ID	\$ 1,000.00	\$ _____
Purpose of Above Expenditure: Get Out The Vote Support			
10 / 27 / 04	^{3.} Kootenai Valley Press P.O. Box 3189 Bonners Ferry, ID 83805	\$ 40.00	\$ _____
Purpose of Above Expenditure: Subscription			
10 / 27 / 04	^{4.} Kootenain Valley Press P.O. Box 3189 Bonners Ferry, ID	\$ 90.00	\$ _____
Purpose of Above Expenditure: Advertising			
10 / 29 / 04	^{5.} Bonner County Daily Bee 310 Church Street Sandpoint, ID 83864	\$ 1,401.00	\$ _____
Purpose of Above Expenditure: Advertising			
10 / 29 / 04	^{6.} Bonner County Daily Bee 310 Church Street Sandpoint, ID 83864	\$ 84.40	\$ _____
Purpose of Above Expenditure: Thank You Advertisement			
Subtotals of Columns A & B		\$ 3,615.40	\$ 0.00
Total This Page (add columns A & B)			\$ 3,615.40

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
Shawn Keough

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
11 / 1 / 04	^{1.} Verizon Wireless P.O. Box 96088 Bellevue, WA 98009	\$ 272.92	\$ _____
Purpose of Above Expenditure: Campaign Cell Phone Service			
10 / 31 / 04	^{2.} Staples 3210 Highway 95 North Sandpoint, ID 83864	\$ 262.72	\$ _____
Purpose of Above Expenditure: Office Supplies			
11 / 4 / 04	^{3.} Western Ag Reporter 679 Comeback Lane Sagle, ID 83860	\$ 99.00	\$ _____
Purpose of Above Expenditure: Advertising			
11 / 6 / 04	^{4.} Newport Gem State Miner P.O. Box 349 Newport, WA 99156	\$ 265.60	\$ _____
Purpose of Above Expenditure: Advertising			
11 / 6 / 04	^{5.} Bonners Ferry Herald P.O. Box 539 Bonners Ferry, ID 83805	\$ 311.00	\$ _____
Purpose of Above Expenditure: Advertising			
11 / 2 / 04	^{6.} Powerhouse Restaurant 120 East Lake Sandpoint, ID 83864	\$ 100.00	\$ _____
Purpose of Above Expenditure: Election Night Gathering			
Subtotals of Columns A & B		\$ 1,311.24	\$ 0.00
Total This Page (add columns A & B)			\$ 1,311.24

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee Shawn Keough

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
11 / 7 / 04	1. North Idaho Chamber of Commerce c/o Kermit Kiebert P.O. Box 970 Ponderay, ID 83852-0970	\$ 75.00	\$
Purpose of Above Expenditure: Legislative Tour			
11 / 10 / 04	2. Walden Orchards 301 N. First Avenue Sandpoint, ID 83864	\$ 102.50	\$
Purpose of Above Expenditure: Graphic Design Ads			
11 / 10 / 04	3. The River Journal Box 1574 Noxon, MT 59853	\$	\$ 100.00
Purpose of Above Expenditure: Advertising			
/ /	4.	\$	\$
Purpose of Above Expenditure:			
/ / /	5.	\$	\$
Purpose of Above Expenditure:			
/ / /	6.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 177.50	\$ 100.00
Total This Page (add columns A & B)			\$ 277.50

**SCHEDULE C-2A
CONTRIBUTIONS PLEDGED BUT NOT YET RECEIVED**

Name of Candidate or Committee Shawn Keough	Report Covering the Period From <u>10 / 18 / 04</u> to <u>11 / 12 / 04</u>
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Directions: Complete this schedule if you were promised and agreed to accept a contribution during this reporting period but have not actually received the money, goods or services offered before the end of the reporting period. Do not include these entries on Schedule A until you actually receive the contribution.

Line 1: Pledged Contributions of \$50.00 or Less This Period: Total Number <u>0</u> Total Amount \$ <u>0.00</u>
--

Pledged Contributions of More Than \$50.00 This Period:

Pledge For	Date of Pledge	Full Name, Mailing Address and Zip Code of Contributor/Lender	Amount Pledged
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	1.	0.00
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	2.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	3.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	4.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	5.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	6.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	7.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	8.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	9.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	10.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	11.	

Line 2: Total Amount of Pledged Contributions of More Than \$50.00	\$ <u>0.00</u>
Line 3: Total Amount of Pledged Contributions of \$50.00 or Less (enter amount from line 1)	\$ <u>0.00</u>
Line 4: Total Amount of Pledged Contributions this Period (add lines 2 and 3) Also enter this total in Section V, page 1.	\$ <u>0.00</u>

SCHEDULE C-2B
EXPENDITURES INCURRED (Debts and Obligations) & PAYMENT MADE ON DEBT

Name of Candidate or Committee Shawn Keough	Report Covering the Period From 10 18 04 to 11 12 04
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Directions: Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service or made a payment on debt. Do not include these entries on Schedule B.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period:	Total Number 0	Total Amount \$ 0.00
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Full Name, Mailing Address and Zip Code or Creditor		Purpose of Expenditure
1.		0
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____		
2.		
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____		
3.		
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____		
4.		
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____		
5.		
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____		

Totals of this Page
Line 2: Amount Incurred This Period (Carry forward to Page 2, Under Incurred Expenditures) \$ _____
Line 3: Payment This Period (Carry forward to Page 2, under Expenditures and Incurred Expenditures) \$ _____