



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

Section I

Name of Candidate or Political Committee and Chairperson <i>Gary D. Baty</i>		Office Sought (if candidate) <i>State Senator</i>	District (if any) <i>24</i>
Mailing Address <input type="checkbox"/> Check if address change. <i>2778 Chaparral Circle</i>	City and Zip <i>Twin Falls 83301</i>	Home Phone <i>734-9450</i>	Work Phone <i>733-2121</i>
Name of Political Treasurer <i>Robert Parrish</i>		STATE OF IDAHO	
Mailing Address <input type="checkbox"/> Check if address change. <i>1526 Princeton Dr</i>	City and Zip <i>Twin Falls 83301</i>	Home Phone <i>733-8542</i>	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 05 / 26 / 04 through 06 / 26 / 04

- | | | |
|--|---|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report | <input type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> Quarterly (April 30)
(only filed by ballot measure committees) |
| <input checked="" type="checkbox"/> 30 Day Post-Primary Report | <input type="checkbox"/> 30 Day Post-General Report | <input type="checkbox"/> Quarterly (July 30)
(only filed by ballot measure committees) |
| <input type="checkbox"/> October 10 Pre-General Report | <input type="checkbox"/> Annual Report | |

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*	\$ XXXXXX	\$ 0
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 0	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 30.00	\$ 30.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 30.00	\$ 30.00
Line 5: Total Expenditures (Enter amount from page 2)	\$ 379.88	\$ 379.88
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 30.00	\$ 30.00

*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

CONTRIBUTIONS PLEDGED - INCURRED EXPENDITURES

Contributions Pledged during this reporting period but not yet received: None \$ _____ (see attached Schedule C-2A)

Incurred Expenditures during this reporting period but not yet paid: None \$ _____ (see attached Schedule C-2B)

Section VI

CERTIFICATION

Return This Report To:
Pete T. Cenarrusa
Secretary of State
PO Box 83720
Boise ID 83720-0080
fax: (208) 334-2282

I Robert Parrish, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Robert Parrish
Signature of Political Treasurer

SCHEDULE A

ITEMIZED CONTRIBUTIONS

of more than Fifty Dollars (\$50.00) this period
less than

Name of Candidate or Committee
Gary D. Baty

		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
<u>05/28/04</u>	1. <u>Timothy F. Quigley</u> <u>5447 N 700 E</u> <u>Castleton 1083321</u>	\$ <u>30.⁰⁰</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
/ /	2.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
/ /	3.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input 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		\$ <u>30.⁰⁰</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ _____

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
Gary D. Baty

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<i>05/28/04</i>	<i>1. CBC 250 Washington St. Twin Falls ID 83301</i>	\$ <i>121.90</i>	\$ _____
Purpose of Above Expenditure: <i>Yard Signs, Printing</i>			
<i>05/28/04</i>	<i>2. Costco Wholesale 731 Pole Line Rd Twin Falls ID 83301</i>	\$ <i>25.38</i>	\$ _____
Purpose of Above Expenditure: <i>Parade Handout candy</i>			
<i>05/28/04</i>	<i>3. Ace Printing 250 Main Ave N. Twin Falls ID 83301</i>	\$ <i>222.60</i>	\$ _____
Purpose of Above Expenditure: <i>Handbills, Printing</i>			
<i> / /</i>	<i>4.</i>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<i> / /</i>	<i>5.</i>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<i> / /</i>	<i>6.</i>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<i> / /</i>	<i>7.</i>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<i> / /</i>	<i>8.</i>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<i> / /</i>	<i>9.</i>	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ _____	\$ _____
Total This Page (add columns A & B)			\$ _____