

C-2
Rev. 06/04



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

Section I

Name of Candidate or Political Committee and Chairperson Jim Alexander		Office Sought (if candidate) State Senate	District (if any) 22
Mailing Address 1055 N 17th E	<input type="checkbox"/> Check if address change.	City and Zip Mtn Home 83647	Home Phone 587-524311
Name of Political Treasurer Jo Gridley		STATE OF IDAHO	
Mailing Address 790 E 9th N	<input type="checkbox"/> Check if address change.	City and Zip Mtn Home 83647	Home Phone 587-3837
		Work Phone 587-3346	Work Phone ext 232

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 / 1 / 2004 through 10 / 17 / 2004

- 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>0.00</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>18233.65</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>5890.00</u>	\$ <u>32791.37</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>24123.65</u>	\$ <u>32791.37</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>1922.00</u>	\$ <u>10589.72</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>22201.65</u>	\$ <u>22201.65</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.

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

Section V

CERTIFICATION

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

Jo Gridley
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee <u>Jim Alexander</u>	Report Covering the Period From <u>10/1/04</u> to <u>10/17/04</u>
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>3</u>	Total Amount \$ <u>90⁰⁰</u>
UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>0</u>	Total Amount \$ <u>0</u>

	Total This Period
<u>2</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 90.00
Itemized Contributions (total all Schedule A sheets)	\$ 5800.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 5890.00
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 0.00
Itemized Expenditures (total all Schedule B sheets)	\$ 1922.00
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)	\$ 1922.00
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
Jim Alexander

Date/Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Leader	Column A Cash or Check	Column B In-Kind (non-monetary)	Column C Loans
10/4/04	1. Gail L Best 1220 E. 9th N. Mtn Home, ID 83647	\$ 100 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 650 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
10/4/04	2. Verlin Gingerich HC 85 Box 28 Mtn Home, ID 83647	\$ 100 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 250 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
10/6/04	3. ITLA PAC PO Box 1777 Boise, ID 83701	\$ 500 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 500 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
10/6/04	4. Idaho Cable Telecommunications Association PAC Fund PO Box 1145 Boise, ID 83701-1145	\$ 300 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 300 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
10/8/04	5. Democratic Party of Blaine County PO Box 3309 Hailey, ID 83333-3309	\$ 1500 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 1500 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
10/8/04	6. Clint Stennett Senate Account PO Box 475 Ketchum, ID 83340	\$ 1000 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 1000 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
10/8/04	7. Idaho Association of Chiropractic Physicians PAC PO Box 1863 Boise, ID 83701	\$ 100 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 100 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
10/8/04	8. Phil Raney 335 Morris Drive Mtn Home, ID 83647	\$ 100 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 100 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
10/13/04	9. Union Pacific Railroad 1416 Dodge Street Omaha, NE 68179	\$ 500 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 500 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
10/13/04	10. Blue Cross of Idaho PO Box 7408 Boise, ID 83707	\$ 100 ⁰⁰	\$ _____	\$ _____
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	\$ 100 ⁰⁰ Calendar Year To Date	\$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ 4,300 ⁰⁰	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ 4,300 ⁰⁰

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

Name of Candidate or Committee
Jim Alexander

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
<u>10/13/04</u>	1. McKesson Corporation 1220 Senlac Drive Carrollton, TX 75006	\$ <u>500⁰⁰</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>500⁰⁰</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
<u>10/13/04</u>	2. Medical Clinic Pharmacy, Inc 203 E. Elm Caldwell, ID 83605	\$ <u>1,000⁰⁰</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>1,000⁰⁰</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
<u> / / </u>	3.	\$ _____	\$ _____	\$ _____
<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>
<u> / / </u>	4.	\$ _____	\$ _____	\$ _____
<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>
<u> / / </u>	5.	\$ _____	\$ _____	\$ _____
<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>
<u> / / </u>	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>
<u> / / </u>	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>
<u> / / </u>	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>
<u> / / </u>	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>
<u> / / </u>	10.	\$ _____	\$ _____	\$ _____
<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		\$ <u>1,500⁰⁰</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ <u>1,500⁰⁰</u>

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

1	1
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Name of Candidate or Committee
Jim Alexander

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
10/6/04	1. Mountain Home News PO Box 1330 Mtn Home, ID 83647	\$ 301 ⁹⁵	\$ _____
Purpose of Above Expenditure: <u>newspaper ads in FamilyLine + Gazette</u>			
10/12/04	2. American Express PO Box 360002 Ft Lauderdale, FL 33336-0002	\$ 1190 ³⁸	\$ _____
Purpose of Above Expenditure: <u>printing / Table Rock Printing</u>			
10/13/04	3. Mountain Home News PO Box 1330 Mtn Home, ID 83647	\$ 429 ⁶⁷	\$ _____
Purpose of Above Expenditure: <u>newspaper ads in FamilyLine, Gazette, + Mtn Home News</u>			
____/____/____	4. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
____/____/____	5. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
____/____/____	6. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
____/____/____	7. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
____/____/____	8. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
____/____/____	9. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
Subtotals of Columns A & B		\$ 1922 ⁰⁰	\$ _____
Total This Page (add columns A & B)			\$ 1,922 ⁰⁰