C-2 Rev. 06/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section I

| Section 1 | | |
|---|--|--|
| Name of Candidate or Political Committee and Chairperson FUN FUNO | Office So | ught (if candidate) District (12 any 14 1 24 |
| Mailing Address O Box 44873 City and Zip Box Se | 2 83711 37 | |
| Name of Political Treasurer 616 A 186274 | | |
| Mailing Address | 23711 433 | one Work Phone 2258 |
| Section II | | |
| Directions: To indicate the type of report being filed, fill in the ap instructional manual for reporting periods and due dates. This report is for the period from | | |
| ☐ 7 Day Pre-Primary Report ☐ 30 Day Post-I | Primary Report | October 10 Pre-General Report |
| ☐ 7 Day Pre-General Report ☐ 30 Day Post- | General Report Z | Annual Report |
| ☐ Semi-Annual Report (Statewide Candidates Only) | | |
| Is this Report an amendment? Yes No | Is this a Termination I | Report? |
| Section III STATEMENT OF NO CONTRI | BUTIONS OR EXPEND | ITURES |
| Directions: If you had no contributions or expenditures during this the appropriate dates and sign this report. Be sure to carry forward Section IV. I hereby certify that I have received no contributions an from | the appropriate "Calendar d have made no expenditur | Year to Date" figures in Column II. es during this reporting period |
| | | |
| To reach your Calendar Year to Date figure: Add this report's Column II figures of your previous report (except on | | |
| Line 1: Cash on Hand January 1, This Year* Line 2: Enter Cash Balance at Close of Last Reporting Period** Line 3: Total Contributions (Enter amount from page 2) Line 4: Subtotal (Add lines 1, 2 and 3) Line 5: Total Expenditures (Enter amount from page 2) Line 6: Cash Balance at Close of Period (Subtract line 5 from line | \$ XXXXX \$ 208. \$ 0 \$ 208. 3 \$ 119.9 4)** | \$ <u>xxxxxx</u> \$ <u>9385</u> 5 \$ <u>9385</u> 5 \$ 9296.60 |
| Line 7: Outstanding Debt to Date | S | |
| *This same figure should be entered on line 1 of all reports filed th **You must report the cash on hand at both the beginning of the re Note that the closing cash balance for the current reporting period | porting period and the clos | |

Return This Report To:
Ben Ysursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
phone: (208) 334-2852
fax: (208) 334-282

CERTIFICATION

__ hereby certify that the information

in this report is a true, compilere and correct Campaign Financial Disclosure Report as

required by law.

Section V

Signature of Political Treasurer

DETAILED SUMMARY PAGE

| Name of Candidate or Commi | no Find | Report Covering the Period From 11 12 106 to 12 131 106 |
|----------------------------|-----------------|---|
| | | CONTRIBUTIONS rs (\$50.00) or Less This Period |
| | Total Number | Total Amount \$ |
| | | EXPENDITURES sy-Five Dollars (\$25.00) This Period |
| | Total | Total |

| | | Total This Perio |
|---|--------|-------------------------|
| Number of Schedule A pages Attached | | |
| Contributions | | |
| Unitemized Contributions (\$50 and less) from top of page | \$ | 0 |
| Itemized Contributions (total all Schedule A sheets) | \$ | 0 |
| Total Contributions (also enter this figure on page 1, Section IV, line 3) | s | 0 |
| Number of Schedule B pages Attached | | |
| Expenditures | | |
| Unitemized Expenditures (less than \$25) from top of page | \$ | 19.95 |
| Itemized Expenditures (total all Schedule B sheets) | \$ | 100.00 |
| Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period) | \$ | |
| Fotal Expenditures (also enter this figure on page 1, Section IV, line 5) | 5 | 119.95 |
| Number of Schedule C-2B pages Attached | | |
| Incurred Expenditures | | |
| Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7) | \$ | 0 |
| Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period) | + 5 | 0 |
| Subtotal | = \$ | 0 |
| Payment this Period (Total all C-2Bs - Payment this Period) | - \$ | 0 |
| fotal Outstanding Balance at close of this period (enter on page 1, Section IV, line 7) | = \$ | 0 |
| Number of Schedule C-2A pages Attached | | |
| Pledged Contributions | 950055 | |
| Amount Pledged this Period | 5 | 0 |

SCHEDULE B ITEMIZED EXPENDITURES

| Page | of |
|------|----|
| 1 | / |
| / | / |

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

| | late or Committee | _ | | | | |
|----------------|---|------------------|---------------------------|--|--|--|
| IJU | IA ACTION FUND | | | | | |
| 2304 (6.00) | | Column A | Column B | | | |
| Date | Full Name, Mailing Address and Zip Code of Recipient | Cash or Check | In-Kind (non-monetary) | | | |
| 11,28,06 | 1355 GALWAY DR MERINIAN IN 83642 | s_/co | s | | | |
| Purpose of Abo | ve Expenditure: PRINTING JESIGN (0575 | | | | | |
| | | s | \$ | | | |
| Purpose of Abo | Purpose of Above Expenditure: | | | | | |
| 1 1 | 3. | \$ | \$ | | | |
| Purpose of Abo | ve Expenditure: | | L | | | |
| 1_1_1_ | 4. | \$ | s | | | |
| Purpose of Abo | we Expenditure: | | | | | |
| | 5. | | | | | |
| | | \$ | \$ | | | |
| Purpose of Abo | ve Expenditure: | | | | | |
| W /_ | 6. | \$ | s | | | |
| Purpose of Abo | ve Expenditure: | - | | | | |
| 1 1 | 7 | \$ | .s | | | |
| Purpose of Abo | ve Expenditure: | | | | | |
| | ß. | \$ | s | | | |
| Purpose of Abo | ve Expenditure: | | | | | |
| | 9. | \$ | \$ | | | |
| Purpose of Abo | ove Expenditure: | | | | | |
| | Subtotals of Columns A & B | \$ | s | | | |
| | Total This Page (add columns A & B) | *** | S | | | |