C-2 Rev. 06/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section 1	¥	(,,			
Name of Candidate or Political Con		Jim John	son-chair	Office Sought (if car	ididate) Distris	et (if any)
Mailing Address 215 E. Flankli	☐ Check if address chang	ge. City and Zip Meridian	83642	Home Phone Pi	O Pri Wait	38-2817
Name of Political Treasurant Sohn 7. Berg				STATE	OF IDAHO	ATE)
Mailing Address 1140 South All	Check if address chan	ge. City and Zip Bolse	83709	Home Phone	Work	Phone 5-0550
ection II			~~~~			
Directions: To indicate the instructional manual for rep This repor		u dutar	oriate dates and	d check the appropulation		
7 Day Pre-Primary	Report [30 Day Post-Prim	ary Report	Octob	er 10 Pre-Ge	neral Report
7 Day Pre-General	Report [30 Day Post-Gen	eral Report	☐ Annu	al Report	
☐ Semi-Annual Repo	rt (Statewide Candida	ites Only)				
Is this Report ar	amendment?	Yes 💆 No	Is this a Term	nination Report?	☐ Yes	⊠ No
Section III	STATEMENT C	F NO CONTRIBU	TIONS OR E	XPENDITURES	1	
Section IV. I hereby certify the section IV.	from	contributions and ha	·	xpenditures during	this reportin	g period
To reach your Calendar Year figures to the Column II figu		this report's Column	1 C	OLUMN I his Period		UMN II Year to Date
Line 1: Cash on Hand Janua	ry I, This Year*			XXXXX	s	0 -
Line 2: Enter Cash Balance	-				XXXX	
Line 3: Total Contributions (Line 4: Subtotal (Add lines	age 2)			\$ \$		
Line 5: Total Expenditures (age 2)			\$		
Line 6: Cash Balance at Clo	l line 5 from line 4)*	* S	- 0	\$	-0-	
Line 7: Outstanding Debt to	Date		\$			
*This same figure should be **You must report the cash Note that the closing cash b	on hand at both the b	eginning of the repor	ting period and	d the close of the ext report as begin	reporting peri ning cash on	od. hand.
	Section V		CERTIFICA	ATION		
Return This Report To: Ben Ysursa	ı	John T	Born	harahs	certify that	the information
Secretary of State	in this re	eport is a true, comple	reasurer)	Campaign Finance	ial Disclosur	e Report as
PO Box 83720 Boise 11) 83720-0080 phone: (208) 334-2852	required		A 9 B	Campaign Financ	and Disclosur	o resport us
fax: (208) 334-2282		- 7	The J. O.	Transport of the state of the s		

Page }

Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee	Report Covering the Period	7
Mexidian Chamber PAC		5 11
THE TRIAN CHAMBER PAC	From/// 06 to/_	100

UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Number

UNITEMIZED EXPENDITURES

Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total Number —

Amount \$____

		Total This Period	
Number of Schedule A pages Attached			
Contributions			
Uniternized 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)		-0-	
Number of Schedule B pages Attached			
Expenditures			
Unitemized Expenditures (less than \$25) from top of page	\$	-0	
Itemized Expenditures (total all Schedule B sheets)	\$	-0	
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)	\$	-0	
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)	- s		
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$	-0	
Number of Schedulc C-2A pages Attached			
Pledged Contributions			
Amount Pledged this Period	\$	-0	