



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

Section I

Name of Candidate or Political Committee and Chairperson <u>Hilde Kellogg</u>		Office Sought (if candidate) Representative	District (if any) 5
Mailing Address <u>P O Box 1479</u>	<input type="checkbox"/> Check if address change.	City and Zip <u>Post Falls ID 83877-1479</u>	Home Phone <u>(208)773-5412</u>
Name of Political Treasurer <u>Elizabeth Garrett</u>		Home Phone <u>(208)773-5412</u>	Work Phone <u>(208)773-5412</u>
Mailing Address <u>P O Box 776</u>	<input type="checkbox"/> Check if address change.	City and Zip <u>Post Falls ID</u>	Home Phone <u>(208)773-5412</u>
			Work Phone <u>(208)773-1521</u>

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 / 21 / 02 through 11 / 15 / 02

- | | | |
|--|--|--|
| <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 type="checkbox"/> 30 Day Post-Primary Report | <input checked="" 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*	\$ <u>XXXXXX</u>	\$ <u>941.39</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>1,334.39</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>3,850.00</u>	\$ <u>14,110.50</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>5,184.39</u>	\$ <u>15,051.89</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>3,026.41</u>	\$ <u>12,893.91</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>2,157.98</u>	\$ <u>2,157.98</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

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

Elizabeth Garrett
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee Hilde Kellogg	Report Covering the Period From 10 / 21 / 02 to 11 / 15 / 02
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UNITEMIZED CONTRIBUTIONS

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

Total Number <u> 3 </u>	Total Amount \$ <u>150.00</u>
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UNITEMIZED EXPENDITURES

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

Total Number <u> 0 </u>	Total Amount \$ <u> 0.00</u>
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	Total This Period
<u> 2 </u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 150.00
Itemized Contributions (total all Schedule A sheets)	\$ 3,700.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 3,850.00
<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)	\$ 3,026.41
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 3,026.41

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

Name of Candidate or Committee
Hilde Kellogg

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
10/23/02	1. Wells Fargo Idaho PAC 877 W Main St Boise ID 83702	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10/24/02	2. Hilde Kellogg P O Box 1479 Post Falls ID 83877-1479	\$ _____	\$ _____	\$ 2,000.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ <u>2,000.00</u> Calendar Year To Date
10/24/02	3. Alliance for the West - State Account P O Box 237 Boise ID 83701	\$ 300.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>300.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10/25/02	4. J. R. Simplot Company P O Box 27 Boise ID 83707-0027	\$ 200.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>200.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10/26/02	5. Contractors Northwest Inc P O Box 6300 Coeur d'Alene ID 83816-1938	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10/28/02	6. Warren E Clark 53499 Old Hwy 95 Rathdrum ID 83858	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10/28/02	7. Assoc. Builders & Contractors P O Box 3787 Spokane WA 99220-3787	\$ 200.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>200.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
11/02/02	8. Philip Morris Management Corp. 120 Park Ave New York NY 10017-5592	\$ 250.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>350.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
11/02/02	9. Forest Capital Partners LLC 6500 Mineral Drive Ste 101 Coeur d'Alene ID 83815	\$ 250.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>250.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
11/04/02	10. Idaho Land Title Ass'n. 7154 W State St Ste 304 Boise ID 83703	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
Subtotals of Columns A, B & C		\$ 1,600.00	\$ 0.00	\$ 2,000.00
Total This Page (add columns A, B & C)				\$ 3,600.00

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

Name of Candidate or Committee
Hilde Kellogg

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
11/09/02	1. Miller Brewing Co. P O Box 482 Milwaukee WI 53201-0482	\$ 100.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 100.00 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		\$ 100.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 100.00

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

Name of Candidate or Committee Hilde Kellogg

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10/23/02	1. Insty-Prints 503 Seltice Way #5 Post Falls ID 83854	\$ 553.37	\$ _____
Purpose of Above Expenditure: Brochures			
10/23/02	2. Clear Channel Broadcasting, Inc. P O Box 847479 Dallas TX 75284-7479	\$ 555.00	\$ _____
Purpose of Above Expenditure: Radio Ads on KQNT Spokane			
10/24/02	3. KXLY AM 500 W Boone Avenue Spokane WA 99201	\$ 800.00	\$ _____
Purpose of Above Expenditure: Radio Ads			
10/25/02	4. Postmaster Post Falls ID	\$ 111.00	\$ _____
Purpose of Above Expenditure: Postage Stamps			
11/08/02	5. The IDAHO Spokesman-Review 608 Northwest Blvd Ste 200 Coeur d'Alene ID 83814	\$ 69.84	\$ _____
Purpose of Above Expenditure: Thank You Ad			
11/08/02	6. Coeur d'Alene Press P O Box 7000 Coeur d'Alene ID 83816	\$ 77.16	\$ _____
Purpose of Above Expenditure: Thank You Ad			
11/15/02	7. Nickel's Worth P O Box 2048 Coeur d'Alene ID 83816-2048	\$ 860.04	\$ _____
Purpose of Above Expenditure: Political Advertising			
/ /	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 3,026.41	\$ 0.00
Total This Page (add columns A & B)			\$ 3,026.41

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

Name of Candidate or Committee Hilde Kellogg	Report Covering the Period From <u>10 / 21 / 02</u> to <u>11 / 15 / 02</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>
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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.	
<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 BUT NOT YET PAID**

Name of Candidate or Committee <p align="center">Hilde Kellogg</p>	Report Covering the Period From <u>10 / 21 / 02</u> to <u>11 / 15 / 02</u>
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Directions: Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service, but did not make payment before the end of the reporting period. Do not include these entries on Schedule B until you actually make payment.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period:	Total Number <u>0</u>	Total Amount \$ <u>0.00</u>
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Incurred Expenditures of \$25.00 or More This Period:

Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	Amount Incurred
/ /	1.	
Purpose of Above Expenditure:		
/ /	2.	
Purpose of Above Expenditure:		
/ /	3.	
Purpose of Above Expenditure:		
/ /	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:		

Line 2: Total Amount of Incurred Expenditures \$25.00 or more	\$ <u>0.00</u>
Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1)	\$ <u>0.00</u>
Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Section V, page 1.	\$ <u>0.00</u>