

Rev. 7/97



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE
(Please Print or Type)

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson, Office Sought, District, Mailing Address, City and Zip, Home Phone, Work Phone, Name of Political Treasurer, and their respective addresses and phone numbers.

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 5/13/02 through 6/7/02

- Checkboxes for report types: 7 Day Pre-Primary Report, 7 Day Pre-General Report, Quarterly (April 30), 30 Day Post-Primary Report, 30 Day Post-General Report, Quarterly (July 30), October 10 Pre-General Report, Annual Report.

Is this Report an amendment? Is this a Termination Report?

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.

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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand January 1, Cash Balance at Close of Last Reporting Period, Total Contributions, Subtotal, Total Expenditures, and Cash Balance at Close of Period.

\*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.

Section V

CONTRIBUTIONS PLEDGED - INCURRED EXPENDITURES

Contributions Pledged during this reporting period but not yet received: Incurred Expenditures during this reporting period but not yet paid:

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

Section VI

CERTIFICATION

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

Signature of Sara J. Burrell, Political Treasurer

**DETAILED SUMMARY PAGE**

Name of Candidate or Committee <i>McSeachin for State Representative</i>	Report Covering the Period From <i>5/15/02</i> to <i>6/7/02</i>
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**UNITEMIZED CONTRIBUTIONS**  
Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number <u>7</u>	Total Amount \$ <u>325<sup>00</sup></u>
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**UNITEMIZED EXPENDITURES**  
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total Number _____	Total Amount \$ _____
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	Total This Period
<u>7</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>325.00</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>601.00</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>925.00</u>
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$ <u>932.55</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>932.55</u>

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

Name of Candidate or Committee  
*McGeachin for State Representative*

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A Cash or Check	Column B In-Kind (non-monetary)	Column C Loans
<u>5/13/02</u> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<sup>1.</sup> <i>F.S. Gunnerson 1776 Science Center Dr. Idaho Falls ID 83405</i>	\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/13/02</u> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<sup>2.</sup> <i>Id. Assoc. of Realtors 1450 W Bannock Boise, Id. 83702</i>	\$ <u>200</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/13/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<sup>3.</sup> <i>Janice McGeachin 6121 N 5th W Idaho Falls ID 83401</i>	\$ <u>300.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<sup>4.</sup>	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<sup>5.</sup>	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<sup>6.</sup>	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<sup>7.</sup>	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<sup>8.</sup>	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<sup>9.</sup>	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<sup>10.</sup>	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ <u>600</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)		\$ <u>600</u>		

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

Name of Candidate or Committee

McGrachin for State Representative

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
5/15/02	1. A-1 Sign Co. 2717 N Perry Spokane, WA 99207	\$ 463.83	\$ _____
Purpose of Above Expenditure:			
5/16/02	2. Ross Industries 60 State St (Ross Bldg) Liberty NY 12754	\$ 468.72	\$ _____
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:			
___/___/___	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 932.55	\$ _____
Total This Page (add columns A & B)			\$ 932.55