

C-2 Rev. 7/97



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

02 OCT 29 PM 3:05 RECEIVED STATE SECRETARY OF IDAHO

Section I

Name of Candidate or Political Committee and Chairperson: Phil Hart; Office Sought: State Rep.; District: 3; Mailing Address: 4430 E. Sarah Loop, Athol, Idaho; Home Phone: 683-0456; Work Phone: 667-2600; Name of Political Treasurer: Dean Isaacson; Mailing Address: P. O. Box 1289, Rathdrum 83858; Home Phone: 676-9288; Work Phone: 676-9288

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 / 02 through 10 / 20 / 02

- 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? 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.

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: Line Item, Column I (This Period), Column II (Calendar Year to Date). Rows include Cash on Hand, Cash Balance, 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: None \$; Incurred Expenditures during this reporting period but not yet paid: None \$

Return This Report To: Pete T. Conarruth, Secretary of State, PO Box 63728, Boise ID 83720-9088, Fax: (208) 334-2282

Section VI

CERTIFICATION

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

Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee Phil Hart	Report Covering the Period From <u>10/01/02</u> to <u>10/20/02</u>
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UNITEMIZED CONTRIBUTIONS Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>0</u>	Total Amount \$ <u>0</u>

UNITEMIZED EXPENDITURES Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>4</u>	Total Amount \$ <u>78.22</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$
Itemized Contributions (total all Schedule A sheets)	\$ 300.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 300.00
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 78.22
Itemized Expenditures (total all Schedule B sheets)	\$ 3,198.40
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$3,276.62

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

Name of Candidate or Committee Phil Hart		Column A	Column B	Column C
Date/Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Leader	Cash or Check	In-Kind (non-monetary)	Loans
10/10/02	1. Nelson Campbell 2144 Poirier Rd Blanchard, Idaho 83804	\$ 300.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ 300.00 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		\$ 300.00	\$ _____	\$ 300.00
Total This Page (add columns A, B & C)				

SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee			
Phil Hart			
		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10, 11, 02	1. P R Promotions P. O. Box 34407 Bethesda, Maryland 20827	\$ 750.00	\$ _____
Purpose of Above Expenditure: Signs			
10, 3, 02	2. Alpha Omega Distributors 2091 E. Remington Rd., Achol ID 83801	\$ 1,471.22	\$ _____
Purpose of Above Expenditure: signs			
10, 8, 02	3. Post Office 7th Street, Coeur d'Alene, Idaho 83816	\$ 86.59	\$ _____
Purpose of Above Expenditure: postage			
10, 9, 02	4. Insty Prints 314 N, 3rd Street, Coeur d'Alene 83814	\$ 586.94	\$ _____
Purpose of Above Expenditure: printing			
10, 15, 02	5. Staples 206 Ironwood Drive, Coeur d'Alene, Idaho 83814	\$ 57.73	\$ _____
Purpose of Above Expenditure: computer supplies			
10, 18, 02	6. Post Office 7th Street, Coeur d'Alene, Idaho 83814	\$ 84.72	\$ _____
Purpose of Above Expenditure: postage			
10, 17, 02	7. Feed and Farm Store 6265 Government Way, Coeur d'Alene, Idaho 83815	\$ 84.30	\$ _____
Purpose of Above Expenditure: stakes			
10, 19, 02	8. Home Depot 220 W. Kathleen Ave, Cosur d'Alene, Idaho 83815	\$ 76.90	\$ _____
Purpose of Above Expenditure:			
	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
		\$ 3,198.40	\$ _____
Subtotals of Columns A & B			\$ 3,198.40
Total This Page (add columns A & B)			

SCHEDULE C-2A CONTRIBUTIONS PLEDGED BUT NOT YET RECEIVED

Name of Candidate or Committee Phil Hart	Report Covering the Period From <u>10 / 1 / 02</u> to <u>10 / 20 / 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-</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/Leader	Amount Pledged
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	1. none	
<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

\$ 0

Line 3: Total Amount of Pledged Contributions of \$50.00 or Less (enter amount from line 1)

\$ 0

Line 4: Total Amount of Pledged Contributions this Period (add lines 2 and 3) Also enter this total in Section V, page 1.

\$ 0

SCHEDULE C-2B EXPENDITURES INCURRED BUT NOT YET PAID

Name of Candidate or Corporation Phil Hart	Report Covering the Period From <u>10/1/02</u> to <u>10/20/02</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 0 Total Amount \$0

Incurred Expenditures of \$25.00 or More This Period:		Amount Incurred
Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	
10/11/02	1. P. R. Promotions P. O. Box 34407 Bethesda, Maryland 20827	\$120.00
	Purpose of Above Expenditure: shipping on signs	
	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 \$ 120.00

Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1) \$ _____

Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Section V, page 1. \$ 120.00