

C-2 Rev. 7/97



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

POSTED

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 another Mailing Address/Phone/Zip field.

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 1/1/02 through 5/12/02

- 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 description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand, Contributions, Expenditures, and Cash Balance.

\*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. Conrussa, Secretary of State, PO Box 83720, Boise ID 83720-0080, fax: (208) 334-2282

Section VI

CERTIFICATION

I Joel D. Horton, 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 <u>Joel D. Horton</u>	Report Covering the Period From <u>1/1/02</u> to <u>5/12/02</u>
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**UNITEMIZED CONTRIBUTIONS**  
Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 0                      Total Amount \$ 0

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

Total Number 0                      Total Amount \$ 0

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ 0
Itemized Contributions (total all Schedule A sheets)	\$ 150
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 150
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 0
Itemized Expenditures (total all Schedule B sheets)	\$ 150
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 150

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

Name of Candidate or Committee  
Joel D. Horton

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
<u>3/27/02</u>	1. <u>Joel D. Horton</u> <u>PO Box 1615</u> <u>Boise, ID 83701-1615</u>	\$ <u>150.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>150.00</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
<u>    /    /    </u>	2.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
<u>    /    /    </u>	3.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
<u>    /    /    </u>	4.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
<u>    /    /    </u>	5.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
<u>    /    /    </u>	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
<u>    /    /    </u>	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
<u>    /    /    </u>	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
<u>    /    /    </u>	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
<u>    /    /    </u>	10.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ <u>150.00</u>	\$ <u>0</u>	\$ <u>0</u>
Total This Page (add columns A, B & C)				\$ <u>150.00</u>

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

Name of Candidate or Committee  
Joel D. Horton

Column A

Column B

Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
3/27/02	1. Secretary of State Room 205, Statehouse Boise, ID 83720	\$ 150	\$
Purpose of Above Expenditure: <u>Filing Fee</u>			
/ /	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:			
/ /	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 150.00	\$ 0
Total This Page (add columns A & B)			\$ 150.00