



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

Section I

Name of Candidate or Political Committee and Chairperson: THOMAS E. MOSS. Office Sought: State Rep. District: 31, Seat B. Mailing Address: 75 E JUDICIAL STREET, BLACKFOOT 83221. Home Phone: 684-3800. Work Phone: 785-1940. Name of Political Treasurer: SARA J. STAUB. Mailing Address: 75 E JUDICIAL STREET, BLACKFOOT 83221. Home Phone: 785-2395. Work Phone: 785-1940.

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 / 25 / 00 through 11 / 17 / 00.

- 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 Pro-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. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

CI 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 January 1, 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.

Section VI

CERTIFICATION

Return This Report To: Pete T. Cenarrusa, Secretary of State, PO Box 83720, Boise ID 83720-0080, fax: (208) 3362282

I, SARA J. STAUB, 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. Staub, Political Treasurer

DETAILED SUMMARY PAGE

| | |
|--|---|
| Name of Candidate or Committee THOMAS E. MOSS | Report Covering the Period From <u>10 / 25 / 00</u> to <u>11 / 17 / 00</u> |
|--|---|

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 | |
| Contributions | |
| Unitemized Contributions (\$50 and less) from top of page | \$.00 |
| Itemized Contributions (total all Schedule A sheets) | \$ 350.00 |
| Total Contributions (also enter this figure on page 1, Section IV, line 3) | \$ 350.00 |
| <u>7</u> Number of Schedule B pages Attached | |
| Expenditures | |
| Unitemized Expenditures (less than \$25) from top of page | \$.00 |
| Itemized Expenditures (total all Schedule B sheets) | \$ 218.72 |
| Total Expenditures (also enter this figure on page 1, Section IV, line 5) | \$ 218.72 |

**SCHEDULE A
ITEMIZED CONTRIBUTIONS**

of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee
THOMAS E. MOSS

| | | Column A | Column B | Column C |
|---|---|------------------------------------|-----------------------------------|-----------------------------------|
| Date/ Receipt For | Full Name, Mailing Address and Zip Code of Contributor/Lender | Cash or Check | In-Kind (non-monetary) | Loans |
| 10/30/00 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 1. Kraft Foods, Inc. c/o c. A. Smyser 134 S 5th St Boise ID 83703. | \$ 1.00.00 | \$ _____ | \$ _____ |
| | | \$ 100.00 Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| 11/01/00 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 2. QWest-Idaho PAC 999 Main St., 11th Floor Boise ID 83702 | \$ 150.00 | \$ _____ | \$ _____ |
| | | \$ 450.00 Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| 11/06/00 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | 3. Nez Perce Tribe PAC P O Box 698 Lapwai ID 83540 | \$ 100.00 | \$ _____ | \$ _____ |
| | | \$ 100.00 Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| _____ 3 Primary CI General | 4 | \$ _____ | \$ _____ | \$ _____ |
| | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| _____ <input type="checkbox"/> Primary a General | 5 | \$ _____ | \$ _____ | \$ _____ |
| | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| _____ <input type="checkbox"/> Primary <input type="checkbox"/> General | 6 | \$ _____ | \$ _____ | \$ _____ |
| | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| _____ <input type="checkbox"/> Primary <input type="checkbox"/> General | 7 | \$ _____ | \$ _____ | \$ _____ |
| | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| _____ <input type="checkbox"/> Primary <input type="checkbox"/> General | 8 | \$ _____ | \$ _____ | \$ _____ |
| | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| _____ <input type="checkbox"/> Primary <input type="checkbox"/> General | 9 | \$ _____ | \$ _____ | \$ _____ |
| | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| _____ <input type="checkbox"/> Primary <input type="checkbox"/> General | 10 | \$ _____ | \$ _____ | \$ _____ |
| | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| Subtotals of Columns A, B & C | | \$ 350.00 | \$ _____ | \$ _____ |
| Total This Page (add columns A, B & C) | | | | \$ 350.00 |

SCHEDULE B ITEMIZED EXPENDITURES

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

| |
|--|
| Name of Candidate or Committee THOMAS E. MOSS |
|--|

Column A

Column B

| Date | Full Name, Mailing Address and Zip Code of Recipient | Cash or Check | In-Kind (non-monetary) |
|--|--|---------------|------------------------|
| 11/6/00 | 1 Thomas E. Moss 75 E Judicial Street Blackfoot ID 83221 | \$ 45.82 | \$ |
| Purpose of Above Expenditure: Travel & Meal/American Falls Speaking Engagement | | | |
| 11/10/00 | 2 Dennis Lake 830 W Taber Road Blackfoot ID 83222 | \$ 173.00 | \$ |
| Purpose of Above Expenditure: Newspaper ads | | | |
| - / - / | 3 | \$ | \$ |
| Purpose of Above Expenditure: | | | |
| - J - I - | 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 | | \$ 218.82 | \$ 00 |
| Total This Page (add columns A & B) | | | \$ 210.82 |