



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

Section I

Name of Candidate or Political Committee and Chairperson Todd M. Hammond		Office Sought (if candidate) State Rep.	District (if any) 27a
Mailing Address <input type="checkbox"/> Check if address change. 985 Hillview DR.	City and Zip Rexburg ID 83440	Home Phone 359 2517	Work Phone 356 1437
Name of Political Treasurer Noelle Hammond			
Mailing Address <input type="checkbox"/> Check if address change. 985 Hillview DR.	City and Zip Rexburg 83440	Home Phone SAME	Work Phone AKA

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 6 / 3 / 00 through 9 / 30 / 2000

- | | | |
|---|--|--|
| <input type="checkbox"/> CI 7 Day Pre-Primary Report | <input type="checkbox"/> CI 7 Day Pre-General Report | <input type="checkbox"/> Quarterly (April 30)
(only filed by ballot measure committees) |
| <input type="checkbox"/> CI 30 Day Post-Primary Report | <input type="checkbox"/> CI 30 Day Post-General Report | <input type="checkbox"/> Quarterly (July 30)
(only filed by ballot measure committees) |
| <input checked="" type="checkbox"/> October 10 Pre-General Report | <input type="checkbox"/> Annual Report | |

Is this Report an amendment? CI 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*	\$ XXXXXX	\$ 0.0
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 0.0	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 4335 ⁰⁰	\$ 4335 ⁰⁰
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 4335 ⁰⁰	\$ 4335 ⁰⁰
Line 5: Total Expenditures (Enter amount from page 2)	\$ 1544 ⁰⁰	\$ 1544 ⁰⁰
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 2791 ⁰⁰	\$ 2791 ⁰⁰

*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

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

Noelle Hammond
Signature of Political Treasurer

Return This Report To:

Pete T. Cenarrusa
Secretary of State
PO Box 83720
Boise ID 83720-0080
fax: (208) 334-2282

DETAILED SUMMARY PAGE

Name of Candidate or Committee TODD M. HAMMOND	Report Covering the Period From <u>6</u> / <u>1</u> / <u>00</u> to <u>10</u> / <u>5</u> / <u>00</u>
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UNITEMIZED CONTRIBUTIONS

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

Total Number 7 Total Amount \$ 85⁰⁰

UNITEMIZED EXPENDITURES

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

Total Number _____ Total Amount \$ _____

	Total This Period
<u>2</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>85⁰⁰</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>4250⁰⁰</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>4335⁰⁰</u>
<u>Nu</u> / <u>iber</u> of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$ <u>1544⁰⁰</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>1544⁰⁰</u>

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

Name of Candidate or Committee
TODD M. HAMMOND

		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
<u>9/27/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	1. <u>Republican House Caucus Club</u> <u>309 Statehouse</u> <u>BOISE, ID 83720</u>	\$ <u>1000⁰⁰</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>8/3/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2. <u>AGRA PAC</u> <u>P.O. Box 167</u> <u>BOISE, ID 83701</u>	\$ <u>50⁰⁰</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>8/23/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	3. <u>NRA - POLITICAL VICTORY FUND</u> <u>11250 WADLES MITCHELL RD.</u> <u>FAIRFAX, VA 22030</u>	\$ <u>200⁰⁰</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>8/31/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	4. <u>AG & NATURAL RESOURCES PAC</u> <u>5685 PARAPET CT.</u> <u>BOISE, ID 83703</u>	\$ <u>500⁰⁰</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>8/30/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	5. <u>AGRA PAC</u> <u>P.O. BOX 167</u> <u>BOISE, ID 83701</u>	\$ <u>100⁰⁰</u> \$ <u>150⁰⁰</u> Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>9/7/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	6. <u>LINFORD FOR ST. REP</u> <u>2120 W 4200 S.</u> <u>REXBURG ID 83940</u>	\$ <u>100⁰⁰</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>8/3/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7. <u>IDAHO MEDICAL PAC</u> <u>205 W. JEFFERSON</u> <u>BOISE, ID 83702</u>	\$ <u>350⁰⁰</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>8/4/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8. <u>TAX FAIRNESS PAC</u> <u>1275 SHORELINE</u> <u>BOISE, ID 83702</u>	\$ <u>150⁰⁰</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>9/7/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9. <u>IDAHO REPUBLICAN PARTY</u> <u>P.O. BOX 2267</u> <u>BOISE, ID 83701</u>	\$ <u>500⁰⁰</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>9/25/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10. <u>BRUCE NEWCOMB</u> <u>1626 MONROE AV.</u> <u>BURLEY, ID 83318</u>	\$ <u>500⁰⁰</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ <u>3450⁰⁰</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ <u>3450⁰⁰</u>

SCHEDULE A

ITEMIZED CONTRIBUTIONS

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

Name of Candidate or Committee

		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
9/19/00	1. IDAHO SUGARBEEB PAC 1199 MAIN ST. BOISE, ID 83702	\$ 300 ⁰⁰	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$	\$	\$
		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
9/21/00	2. GAGNER CAMPAIGN P.O. BOX 50699 IDAHO FALLS, ID 83405	\$ 200 ⁰⁰	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$	\$	\$
		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
9/27/00	3. COMMITTEE TO ELECT STAN WILLIAMS 1286 W 200 S PINGREE, ID 83262	\$ 100 ⁰⁰	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$	\$	\$
		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
9/20/00	4. ICULAC P.O BOX 5158 BOISE, ID 83705-0158	\$ 200 ⁰⁰	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$	\$	\$
		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
/ /	5.	\$	\$	\$
CI Primary CI 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.	\$	\$	\$
CI 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		\$ 800 ⁰⁰	\$	\$
Total This Page (add columns A, B & C)				\$ 800 ⁰⁰

SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee
Todd M. Hammond

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
9,30,00	1. ARNOLD PRESS 119 W 2 N REXBURG ID 83440	\$ 1000 ⁰⁰	\$
Purpose of Above Expenditure: PRINTING COST			
9,30,00	2. BMC WEST 202 W. MAIN	\$ 40 ⁰⁰	\$
Purpose of Above Expenditure: LUMBER / MATERIALS			
9,25,00	3. NETSTEP 310 N 2 W #5 REXBURG ID 83440	\$ 150 ⁰⁰	\$
Purpose of Above Expenditure: WEB PAGE			
9,30,00	4. SCOTT NEIBOW RICKS COLLEGE REXBURG ID 83460	\$ 77 ⁰⁰	\$
Purpose of Above Expenditure: DESIGN			
9,30,00	5. WEIBOW SIGNS MINNEAPOLIS, MN (SORRY, I LOST RECEIPT)	\$ 277 ⁰⁰	\$
Purpose of Above Expenditure: WIRDS FOR YARD SIGNS			
- / /	6.	\$	\$
Purpose of Above Expenditure:			
- / /	7.	\$	\$
Purpose of Above Expenditure:			
- / /	8.	\$	\$
Purpose of Above Expenditure:			
- / /	9.	\$ 997⁰⁰	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 1267⁰⁰	\$
Total This Page (add columns A & B)		1544⁰⁰	\$ 1267⁰⁰

1544⁰⁰