

C-2 Rev. 06/04



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

SCANNED

05 FEB -4 PM 1:46

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson (ROBERT E SCHAEFER), Office Sought (STATE REP), District (12 A), Mailing Address (PO Box 55), City and Zip (NAMPA 83653), Home Phone (466.3636), Work Phone (SAME), Name of Political Treasurer (BETTY J. SCHAEFER), and their respective contact information.

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 11/13/04 through 12/31/04

- Checkboxes for report types: 7 Day Pre-Primary Report, 30 Day Post-Primary Report, October 10 Pre-General Report, 7 Day Pre-General Report, 30 Day Post-General Report, Annual Report (checked), Semi-Annual Report (Statewide Candidates Only).

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.

[ ] 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, Total Contributions, Subtotal, Total Expenditures, Cash Balance at Close of Period, and Outstanding Debt to Date.

\*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.

Return This Report To: Ben Yursa, Secretary of State, PO Box 83720, Boise ID 83720-0080, phone: (208) 334-2852, fax: (208) 334-2282

Section V

CERTIFICATION

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

Handwritten signature of Robert E. Schaefer

Signature of Political Treasurer

**DETAILED SUMMARY PAGE**

Name of Candidate or Committee <b>ROBERT SCHAEFER</b>	Report Covering the Period From <b>13 Nov 04</b> to <b>31 Dec 04</b>
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<b>UNITEMIZED CONTRIBUTIONS</b>	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>0</u>	Total Amount \$ <u>0</u>
<b>UNITEMIZED EXPENDITURES</b>	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>12</u>	Total Amount \$ <u>174.25</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>- 0 -</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>500 -</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>500 -</u>
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>174 25</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>155 -</u>
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ <u>-</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>329 25</u>
<u>    </u> Number of Schedule C-2B pages Attached	
<b>Incurred Expenditures</b>	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$
Payment this Period (Total all C-2Bs - Payment this Period)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$
<u>    </u> Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	
Amount Pledged this Period	\$

## SCHEDULE A ITEMIZED CONTRIBUTIONS

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

Name of Candidate or Committee SCHAEFER

		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 Dec 04	1. Employers Insurance Group 9790 Gateway Dr. Ste 100 Reno NV 89521	\$ 500	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
/ /	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>
/ /	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>
/ /	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>
/ /	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>
/ /	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>
/ /	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>
/ /	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>
/ /	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>
/ /	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		\$ 500	\$	\$
Total This Page (add columns A, B & C)				\$ 500

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

Name of Candidate or Committee SCHAEFER

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<u>15 Nov 04</u>	1. <u>ASSOCIATED TAXPAYERS OF IDAHO</u>	\$ <u>55<sup>00</sup></u>	\$ _____
Purpose of Above Expenditure: <u>GENERAL</u>			
<u>14 DEC 04</u>	2. <u>CANYON CITY REPUBLICANS</u>	\$ <u>100</u>	\$ _____
Purpose of Above Expenditure: <u>CAMPAIGN WORKER REWARDS</u>			
<u>   /   /   </u>	3. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
<u>   /   /   </u>	4. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
<u>   /   /   </u>	5. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
<u>   /   /   </u>	6. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
<u>   /   /   </u>	7. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
<u>   /   /   </u>	8. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
<u>   /   /   </u>	9. _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
Subtotals of Columns A & B		\$ <u>155<sup>00</sup></u>	\$ _____
Total This Page (add columns A & B)		\$ <u>155</u>	\$ _____