

Postal reg

C-2 Rev. 06/04



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

OCT 15 PM 12:57

TECHNICAL STATE

Section I

Form with fields for Name of Candidate (MARK A. SNODGRASS), Office Sought (Rep. - House), District (202), Mailing Address (405 West Sedgewick Dr.), City and Zip (Mendon 8342), Home Phone (8874939), Work Phone (8610728), Name of Political Treasurer (Adam Collins), and Mailing Address (4843 Mystic Cove Way), City and Zip (Garden City 83714), Home Phone (6729934), Work Phone (9392189).

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 06/05/04 through 09/30/04

- 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, Semi-Annual Report (Statewide Candidates Only)

Is this Report an amendment? [X] Yes [] No Is this a Termination Report? [] Yes [X] 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: Line, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand, Cash Balance, 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 ADAM P. COLLINS 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 Mark A. Snodgrass	Report Covering the Period From <u>02/05/04</u> to <u>09/30/04</u>
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>2</u>	Total Amount \$ <u>100.00</u>

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>0</u>	Total Amount \$ <u>0</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 100.00
Itemized Contributions (total all Schedule A sheets)	\$ 3375.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 3475.00
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 0
Itemized Expenditures (total all Schedule B sheets)	\$ 172.00
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 172.00
<u>0</u> Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 0
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ 0
Subtotal	= \$ 0
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ 0
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 0
<u>0</u> Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$ 0

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

Name of Candidate or Committee
Mark A. Snodgrass

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>06/15/04</u>	<u>1. American Insurance Assoc PAC 9309th St, Ste 2000 Sacramento, CA 95814</u>	\$ <u>250.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>250.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>06/15/04</u>	<u>2. LORAC - Idaho PAC POB 1832 Idaho Falls, ID 83404</u>	\$ <u>125.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>125.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>06/15/04</u>	<u>3. Idaho Life & Health Industry PAC POB 7777 Meridian, ID 83680</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>07/16/04</u>	<u>4. Mike & Cheryl Brown 2528 N. Crooked Creek Way Meridian, ID 83642</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>07/25/04</u>	<u>5. ILA - PAC POB 2038 Boise, ID 83701</u>	\$ <u>1,000.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>2,000.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>08/10/04</u>	<u>6. Reactors PAC 1450 W. Burnrock St. Boise, ID 83702</u>	\$ <u>1,000.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>2000.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>08/24/04</u>	<u>7. Idaho Medical PAC POB 2668 Boise, ID 83701</u>	\$ <u>200.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>450.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>9/10/04</u>	<u>8. Verizon Wireless POB 2107 Folsom, CA 95703</u>	\$ <u>200.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>200.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>9/10/04</u>	<u>9. Boise Cascade Corp. POB 50 Boise, ID 83728</u>	\$ <u>200.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>500.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>9/22/04</u>	<u>10. Pharmaceutical Research & Manufacturers of America 4125 Armita Ave SE Olympia, WA 98501</u>	\$ <u>200.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>200.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ <u>3,375.00</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)		\$ <u>3,375.00</u>	\$ _____	\$ <u>3,375.00</u>

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

Name of Candidate or Committee
Mark A. Snodgrass

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<u>4/13/04</u>	^{1.} <u>Winkers Diner</u> <u>170 E. Fairview</u> <u>Mendon, ID 83242</u>	\$ <u>72.00</u>	\$ _____
Purpose of Above Expenditure: <u>Volunteer dinner</u>			
<u>6/18/04</u>	^{2.} <u>Verizon Wireless</u> <u>POB 96088</u> <u>Belleve, WA 98009</u>	\$ <u>25.00</u>	\$ _____
Purpose of Above Expenditure: <u>cell phone usage</u>			
<u>6/28/04</u>	^{3.} <u>Ten Mile Storage</u> <u>3735 N. Ten Mile Rd.</u> <u>Mendon, ID 83242</u>	\$ <u>25.00</u>	\$ _____
Purpose of Above Expenditure: <u>sign & post storage - July</u>			
<u>7/26/04</u>	^{4.} <u>Ten Mile Storage</u> <u>3735 N. Ten Mile Rd.</u> <u>Mendon, ID 83242</u>	\$ <u>25.00</u>	\$ _____
Purpose of Above Expenditure: <u>sign & post storage - Aug</u>			
<u>9/3/04</u>	^{5.} <u>Ten Mile Storage</u> <u>3735 N. Ten Mile Rd.</u> <u>Mendon, ID 83242</u>	\$ <u>25.00</u>	\$ _____
Purpose of Above Expenditure: <u>sign & post storage - Sept</u>			
<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>172.00</u>	\$ _____
Total This Page (add columns A & B)			\$ <u>172.00</u>