

C-2 Rev. 7/97



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

AMENDED

Section I

Name of Candidate or Political Committee and Chairperson: Phil Hart; Office Sought: state Rep #3; District: #3; Mailing Address: 4430 E Sarah Loop; City and Zip: Arden 83801; Home Phone: 667-2600; Work Phone: 659 5588; Name of Political Treasurer: Terry Newcomb; Mailing Address: PO Box 539; City and Zip: Post Falls 83871; Home Phone: 777 2598; Work Phone: 773 4511

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 3/29/2004 through 5/10/2004

- 7 Day Pre-Primary Report (checked), 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 (checked) 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

Table with 3 columns: Line description, Column I (This Period), Column II (Calendar Year to Date). Rows include Cash on Hand, Cash Balance, 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. 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; Incurred Expenditures during this reporting period but not yet paid: None

STATE OF IDAHO CAMPAIGN FINANCIAL DISCLOSURE REPORT

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

Section VI

CERTIFICATION

I Terry Newcomb, 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

Amended

Name of Candidate or Committee <u>Phil Hart</u>	Report Covering the Period From <u>3/29/04</u> to <u>5/11/04</u>
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UNITEMIZED CONTRIBUTIONS

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

Total Number 6 Total Amount \$ 135.

UNITEMIZED EXPENDITURES

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

Total Number _____ Total Amount \$ _____

	Total This Period
____ Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>135.</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>7140.50</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>7325.50</u>
____ Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>0</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>5240.50</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>5240.50</u>

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

Amended

Name of Candidate or Committee Phil Hart

Date/Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A Cash or Check	Column B In-Kind (non-monetary)	Column C Loans
<u>3/29/04</u>	<u>1. John W Malloy</u> <u>1221 S. Old Orchard Rd</u> <u>Post Falls ID 83854</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>3/30/04</u>	<u>2. Ronald Rankin</u> <u>1704 W Hallcop</u> <u>Coeur d. Alene ID 83814</u>	\$ <u>400.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>400.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/2/04</u>	<u>3. William Ruppert</u> <u>70 Box 671</u> <u>Truchee CA 96160</u>	\$ <u>50.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>50.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/2/04</u>	<u>4. Terry Newcomb</u> <u>70 Box 1091</u> <u>Post Falls ID 83877</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/22/04</u>	<u>5. Jess Goetz</u> <u>PO Box 330</u> <u>Dayview ID 83803</u>	\$ <u>500.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>500.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/23/04</u>	<u>6. John Strimas m.d.</u> <u>200 Fremont Dr #202</u> <u>Coeur d Alene ID 83814</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/3/04</u>	<u>7. Wilbur + Florence Mead</u> <u>15429 W Mead Rd</u> <u>Post Falls, ID 83854</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/3/04</u>	<u>8. A.J. Basile</u> <u>PO Box 484</u> <u>Hoyleton ID 83683</u>	\$ <u>500.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>500.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/3/04</u>	<u>9. Joe + Lynne Threadgill</u> <u>PO Box 1047</u> <u>CDA ID 83814</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/10/04</u>	<u>10. Phil Hart</u> <u>4430 E Sarah Loop</u> <u>Arden ID 83801</u>	\$ _____	\$ <u>5240.50</u>	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ <u>5240.50</u> Calendar Year To Date	\$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ <u>1950.00</u>	\$ <u>5240.50</u>	\$ _____
Total This Page (add columns A, B & C)		\$ _____	\$ <u>5240.50</u>	\$ <u>7190.50</u>

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

Amended

Name of Candidate or Committee: Phil Hart.

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
3,25,04	1. Alpha Omega 2091 E Remington Athol ID 83801	\$	\$ 883.73
Purpose of Above Expenditure: <u>Magnets</u>			
3,31,00	2. Alpha Omega 2091 E Remington Athol ID 83801	\$	\$ 138.38
Purpose of Above Expenditure: <u>Labels</u>			
4,9,04	3. Alpha Omega 2091 E Remington Athol ID 83801	\$	\$ 1340-
Purpose of Above Expenditure: <u>Signs</u>			
4,12,04	4. Advance Printing 6606 Sexton Post Falls, ID 83854	\$	\$ 1194.89
Purpose of Above Expenditure:			
4,19,04	5. Northwest Nameplate E 525 Wallace CPA ID 83814	\$	\$ 31.16
Purpose of Above Expenditure: <u>Signs</u>			
4,15,04	6. Progressive Printing C 516 5th Post Falls, ID 83854	\$	\$ 531.56
Purpose of Above Expenditure: <u>Stationary</u>			
4,27,04	7. CDA Press 2ND + Lake Idaho CPA ID 83814	\$	\$ 250.-
Purpose of Above Expenditure: <u>Ad.</u>			
4,30,04	8. Alpha Omega 2091 E Remington Athol ID 83801	\$	\$ 12940
Purpose of Above Expenditure: <u>Labels</u>			
5,3,04	9. Home Depot 220 W Kathleen CPA ID 83814	\$	\$ 10748
Purpose of Above Expenditure: <u>Stakes</u>			
Subtotals of Columns A & B		\$	\$ 4606.60
Total This Page (add columns A & B)		\$	\$ 4606.60

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

Amended

Name of Candidate or Committee: Phil Hart

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
5.3.04	1. Alpha Omega 2091 E Remington Blvd ID 83201	\$	\$ 32.32
Purpose of Above Expenditure: <u>Signs</u>			
5.4.04	2. City of Post Falls 408 Spokane Post Falls 83854	\$	\$ 10.00
Purpose of Above Expenditure: <u>Sign Permit</u>			
5.4.04	3. Staples 206 W. Woodward CDA ID 83814	\$	\$ 39.50
Purpose of Above Expenditure: <u>office supplies</u>			
5.4.04	4. Tom Haefling 1507 E Birch CDA ID 83814	\$	\$ 250.00
Purpose of Above Expenditure: <u>staff</u>			
5.5.04	5. Alpha Omega 2091 E Remington Blvd ID 83201	\$	\$ 54.00
Purpose of Above Expenditure: <u>Signs</u>			
5.7.04	6. CDA Press 2nd Haleside CDA ID 83814	\$	\$ 248.00
Purpose of Above Expenditure: <u>Ad</u>			
	7.	\$	\$
Purpose of Above Expenditure:			
	8.	\$	\$
Purpose of Above Expenditure:			
	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$	\$ 633.90
Total This Page (add columns A & B)		\$	\$ 633.90