



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

Section I

Name of Candidate or Political Committee and Chairperson <u>Tom Gattfield</u>		Office Sought (if candidate) <u>(D) Representative</u>	District (if any) <u>11B</u>
Mailing Address <u>10625 E Gattfield Rd</u>	<input type="checkbox"/> Check if address change.	City and Zip <u>Emmett, 83617</u>	Home Phone <u>584-3525</u>
Name of Political Treasurer <u>Judith Gattfield</u>		STATE OF IDAHO	
Mailing Address <u>10625 E. Gattfield Rd</u>	<input type="checkbox"/> Check if address change.	City and Zip <u>Emmett 83617</u>	Home Phone <u>584-3525</u>
			Work Phone <u>869-8930</u>
			Work Phone <u>631-2195</u>

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 5/1/04 through 5/1/2004

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

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	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ _____	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>482.75</u>	\$ _____
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>482.75</u>	\$ _____
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>413.00</u>	\$ _____
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>69.75</u>	\$ _____

*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)

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 Judith I Gattfield, hereby certify that the information
(name of Political Treasurer)
in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Judith I Gattfield
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee Tom Gatfield	Report Covering the Period From <u>3/19/04</u> to <u>5/18/04</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 _____ Total Amount \$ _____

	Total This Period
____ Number of Schedule A pages Attached	
Contributions	
Unitized Contributions (\$50 and less) from top of page	\$
Itemized Contributions (total all Schedule A sheets)	\$
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$
____ Number of Schedule B pages Attached	
Expenditures	
Unitized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$

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

Name of Candidate or Committee
Tom Gatfield

		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>3/25/04</u>	1. Terry Haun (NOTE Haun) 2292 Tanglewood Ln. Emmitt, Id. 83617	\$ <u>100⁰⁰</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>3/25/2004</u>	2. Marilyn Cunningham 11785 Sweet-Ola Hwy Sweet ID 83670	\$ <u>100⁰⁰</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>5/6/04</u>	3. Tom Gatfield (TRK Enterprises) 10625 E Gatfield	\$ <u>150⁰⁰</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>5/6/04</u>	4. Gem County Democrats Amy Linville treasurer 1000 Lower Bluff Rd Emmitt, Id 83617	\$ <u>132⁷⁵</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	5.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	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		\$ <u>482.75</u>	\$ <u>0</u>	\$ <u>0</u>
Total This Page (add columns A, B & C)				\$ <u>482.75</u>

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

Name of Candidate or Committee
Tom Gutfeld

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
4.16.04	1. Home Federal 250 S. Washington Emmett, ID 83617	\$ 15 ⁵⁰	\$ _____
Purpose of Above Expenditure: Campaign Checks			
5.16.04	2. Lamar Co P.O. Box 16647 Boise ID 83715	\$ 397 ⁵⁰	\$ _____
Purpose of Above Expenditure: Billboard OCT 2nd 2004 / Nov 2 2004			
/ /	3.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	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		\$ 416.00	\$ 0
Total This Page (add columns A & B)			\$ _____