



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

Section I

| | | | |
|---|---|---|----------------------------------|
| Name of Candidate or Political Committee and Chairperson CITIZENS for FIELD | | Office Sought (if candidate) STATE REPRESENTATIVE | District (if any) 13/8 |
| Mailing Address 3236 Chickory Way | <input type="checkbox"/> Check if address change. | City and Zip BOISE 83706 | Home Phone 336-8565 |
| Name of Political Treasurer FREDA CENARRUSA | | SECRETARY STATE OF IDAHO | |
| Mailing Address 2400 Cherry Ln. | <input type="checkbox"/> Check if address change. | | |

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 1/1/04 through 5/9/04

- | | | |
|--|---|--|
| <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 | \$ <u>2554.42</u> |
| Line 2: Enter Cash Balance at Close of Last Reporting Period** | \$ <u>2554.42</u> | \$ XXXXXX |
| Line 3: Total Contributions (Enter amount from page 2) | \$ <u>950.00</u> | \$ <u>950.00</u> |
| Line 4: Subtotal (Add lines 1, 2 and 3) | \$ <u>3504.42</u> | \$ <u>3504.42</u> |
| Line 5: Total Expenditures (Enter amount from page 2) | \$ <u>887.53</u> | \$ <u>887.53</u> |
| Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** | \$ <u>2616.89</u> | \$ <u>2616.89</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)

Section VI

CERTIFICATION

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

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

Freda Cenarrusa
Signature of Political Treasurer

DETAILED SUMMARY PAGE

| | |
|---|---|
| Name of Candidate or Committee <i>CITIZENS for Field</i> | Report Covering the Period From <i>1/1/04</i> to <i>5/9/04</i> |
|---|---|

| | |
|---|---------------------------------|
| UNITEMIZED CONTRIBUTIONS Contributions of Fifty Dollars (\$50.00) or Less This Period | |
| Total Number <u> 0 </u> | Total Amount \$ <u> 0 </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 |
|--|-------------------|
| ___ Number of Schedule A pages Attached | 1 |
| Contributions | |
| Unitemized Contributions (\$50 and less) from top of page | \$ -0- |
| Itemized Contributions (total all Schedule A sheets) | \$ 950.00 |
| Total Contributions (also enter this figure on page 1, Section IV, line 3) | \$ 950.00 |
| | |
| ___ Number of Schedule B pages Attached | 1 |
| Expenditures | |
| Unitemized Expenditures (less than \$25) from top of page | \$ -0- |
| Itemized Expenditures (total all Schedule B sheets) | \$ 887.53 |
| Total Expenditures (also enter this figure on page 1, Section IV, line 5) | \$ 887.53 |

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

Name of Candidate or Committee
Citizens for Field

| 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>4/15/04</u> | 1. <u>Union Pacific RR</u> <u>1416 Dodge St</u> <u>OMAHA, NE 68179</u> | \$ <u>300.00</u> | \$ _____ | \$ _____ |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| <u>4/28/04</u> | 2. <u>IDAH0 MEDICAL PAC</u> <u>Box 2668</u> <u>BOISE, ID 83701</u> | \$ <u>400.00</u> | \$ _____ | \$ _____ |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| <u>4/30/04</u> | 3. <u>AGC</u> <u>110 27th St</u> <u>BOISE, ID 83702</u> | \$ <u>250.00</u> | \$ _____ | \$ _____ |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date |
| <u> / / </u> | 4. _____ | \$ _____ | \$ _____ | \$ _____ |
| <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>950.00</u> | \$ <u>00</u> | \$ <u>00</u> |
| Total This Page (add columns A, B & C) | | | | \$ <u>950.00</u> |

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

Page 1
1 / 1

Name of Candidate or Committee
CITIZENS for Field

| Date | Full Name, Mailing Address and Zip Code of Recipient | Column A | Column B |
|--|--|------------------|------------------------|
| | | Cash or Check | In-Kind (non-monetary) |
| <u>1/16/04</u> | ^{1.} Power Web 2800, 28th St, Ste. 205 SANTA MONICA, CA 90405 | \$ <u>95.40</u> | \$ _____ |
| Purpose of Above Expenditure: <u>Website</u> | | | |
| <u>1/16/04</u> | ^{2.} House GOP Caucus Statehouse | \$ <u>96.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>Lounge fees</u> | | | |
| <u>2/16/04</u> | ^{3.} House GOP Statehouse | \$ <u>100.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>Donation</u> | | | |
| <u>2/16/04</u> | ^{4.} House GOP Caucus Statehouse | \$ <u>35.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>Donation</u> | | | |
| <u>2/18/04</u> | ^{5.} Office MAX 2509 S. Broadway, BOISE 83706 | \$ <u>50.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>Office Supplies</u> | | | |
| <u>3/10/04</u> | ^{6.} Id. Sec. of St. Statehouse | \$ <u>30.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>Filing Fee</u> | | | |
| <u>3/29/04</u> | ^{7.} Office MAX 2509 S. Broadway, Boise 83706 | \$ <u>80.18</u> | \$ _____ |
| Purpose of Above Expenditure: <u>Office Supplies</u> | | | |
| <u>4/3/04</u> | ^{8.} MAIL BOXES Etc. 967 E. PARKCENTER Blvd. BOISE 83706 | \$ <u>37.00</u> | \$ _____ |
| Purpose of Above Expenditure: <u>Stamps</u> | | | |
| <u>4/15/04</u> | ^{9.} Comp USA 1195 N. MILWAUKEE, BOISE 83704 | \$ <u>363.95</u> | \$ _____ |
| Purpose of Above Expenditure: | | | |
| Subtotals of Columns A & B | | \$ <u>887.53</u> | \$ <u>-0-</u> |
| Total This Page (add columns A & B) | | | \$ <u>887.53</u> |