

C-2  
Rev. 7/97



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

**Section I**

Name of Candidate or Political Committee and Chairperson <b>PROGRESSIVE ACTION COALITION</b>		Office Sought (if candidate) <b>N/A</b>	District (if any) <b>N/A</b>
Mailing Address <input type="checkbox"/> Check if address change. <b>2916 ECHO HILLS DR</b>	City and Zip <b>LEWISTON 83501</b>	Home Phone <b>208-743-7589</b>	Work Phone <b>208-746-4693</b>
Name of Political Treasurer <b>JERRY BODDEN</b>			
Mailing Address <input type="checkbox"/> Check if address change. <b>2916 ECHO HILLS DR</b>	City and Zip <b>LEWISTON 83501</b>	Home Phone <b>208-743-7589</b>	Work Phone <b>208-746-4693</b>

**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 / 01 / 05 through 12 / 31 / 05

- 7 Day Pre-Primary Report
- 7 Day Pre-General Report
- Quarterly (April 30)  
(only filed by ballot measure committees)
- 30 Day Post-Primary Report
- 30 Day Post-General Report
- Quarterly (July 30)  
(only filed by ballot measure committees)
- October 10 Pre-General Report
- 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*	\$ <u>XXXXXX</u>	\$ <u>125.00</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>125.00</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>-</u>	\$ <u>-</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>125.00</u>	\$ <u>-</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>[150.00]</u>	\$ <u>[150.00]</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>275.00</u>	\$ <u>275.00</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**

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

*Jerry Bodden*  
Signature of Political Treasurer

06 JAN 31 AM 7:17  
STATE OF IDAHO

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

**DETAILED SUMMARY PAGE**

Name of Candidate or Committee <b>PROGRESSIVE ACTION COALITION</b>	Report Covering the Period From <u>1/01/05</u> to <u>12/31/05</u>
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**UNITEMIZED CONTRIBUTIONS**  
Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 0 Total Amount \$ \_\_\_\_\_

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

Total Number 0 Total Amount \$ \_\_\_\_\_

	Total This Period
<u>0</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized 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)	\$
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$ [150.00]
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ [150.00]
<u>0</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 B ITEMIZED EXPENDITURES

Page	of
1	1

of Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee  
**PROGRESSIVE ACTION COALITION**

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A Cash or Check	Column B In-Kind (non-monetary)
12/30/05	1. CHECK # 1120 - CONTRIBUTION TO W.M. "Bill Sali" NEVER CASHED	\$ [100.00]	\$ _____

Purpose of Above Expenditure:

12/30/05	2. CHECK # 1119 - CONTRIBUTION TO Nicole Le FAVOUR NEVER CASHED	\$ [50.00]	\$ _____
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Purpose of Above Expenditure:

/ /	3.	\$ _____	\$ _____
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Purpose of Above Expenditure:

/ /	4.	\$ _____	\$ _____
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Purpose of Above Expenditure:

/ /	5.	\$ _____	\$ _____
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Purpose of Above Expenditure:

/ /	6.	\$ _____	\$ _____
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Purpose of Above Expenditure:

/ /	7.	\$ _____	\$ _____
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Purpose of Above Expenditure:

/ /	8.	\$ _____	\$ _____
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Purpose of Above Expenditure:

/ /	9.	\$ _____	\$ _____
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Purpose of Above Expenditure:

Subtotals of Columns A & B		\$ [-150.00]	\$ _____
Total This Page (add columns A & B)			\$ [-150.00]