

## CAMPAIGN FINANCIAL DISCLOSURE REPORT

C-2

SUMMARY PAGE

12 NOV 19 AM 7: 42 (Please Print or Type)

Rev. 10/07

| <b>A</b>  |                                       |                            |                    |                        |  | C CATE              |          |
|---|---------------------------------------|----------------------------|--------------------|------------------------|--|---------------------|----------|
| Section i   |                                       |                            |                    | JEUNE                  | Alli                                   | IT STATE            |          |
| Name of Candidate or Political Committee and Chairperson  |                                       |                            |                    | Office Sought (if sair | diciate)                               | DAH ODistrict (if a |          |
| Donna Capurso   |                                       |                            |                    | House                  |  | <u> </u>            |          |
| Mailing Address 548 Rim Drive   | •                                     | City and Zip               | 02045              | Home Phone 208-267-4   | esne                                   | Work Phone          | 7000     |
| Name of Political Treasurer   |                                       | Moyie Springs,             | 03041              | 200-2074               | 0500                                   | 208-267-7           | 900      |
| Terry Capurso   |                                       |                            |                    |                        |  |                     |          |
| Mailing Address   |                                       | City and Zip               |                    | Home Phone             |  | Wark Phone          |          |
| 548 Rim Drive   |                                       | Moyie Springs,             | 8384               |                        | 6508                                   | 208-267-7           | 7000     |
| L   |                                       |                            |                    |                        | 0300                                   | 200-201-7           | 300      |
|   | indidate or Political Committe        |                            |                    | r 🔲                    |  |                     |          |
| Section II  |                                       | TYPE OF REPORT             |                    |                        |  |                     |          |
| This filling is an: Ori<br>This report is for the period from   | ginal Amendmen<br>10 / 22 / 2012 thro | ough <u>11 / 16 / 2</u>    | 012                |                        |  |                     |          |
| 7 Day Pre-Primary Rep   | porl 30                               | Day Post-Primary Rep       | ort                | Octo                   | ber 10 Pre                             | General Report      |          |
| 7 Day Pre-General Report 30 Day Post-General Report   |                                       |                            |                    | Annual Report          |  |                     |          |
| Semi-Annual Report (S   | Statewide Candidates Only)            |                            |                    |                        |  |                     |          |
| is this a Termination Report:   | Yes X No                              |                            |                    |                        |  |                     |          |
|   |                                       | LIG AGNITRIBUTIONA         | AR EVD             |                        |  | - <del></del> -     |          |
| Section all   |                                       | NO CONTRIBUTIONS           |                    |                        |  | halaw and sian thi  |          |
| Directions: If you had no contri  | re to carry forward the appro-        |                            |                    |                        |  |                     | s report |
| De 301  | e to daily formalia ato appro-        | photo Calonical room       | - Date 117         | garos ir Columni,      | Occuon                                 | <b>.</b>            |          |
| I hereby certify  | that I have received no con           | tributions and have mad    | le no exp          | enditures during the   | nis reportir                           | ng period.          |          |
| Section IV  |                                       | SUMMARY                    |                    |                        |  |                     |          |
|   | Tata figure: Add thin reports         |                            |                    | COLUMNI                |  | COLUMN II           |          |
| 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). |                                       |                            | This Period        |                        | Calendar Year                          |                     |          |
| agules to the continui a agules o   | i your provious report (excep         | ton mio cy.                |                    |                        |  | to Date             |          |
|   |                                       |                            |                    | ~~~~                   |  | 757.20              |          |
| Line 1: Cash on Hand January 1  |                                       | *                          | XXXXXX<br>1,000.00 | \$                     | 757.20                                 |                     |          |
| Line 2: Enter Beginning Cash Ba   |                                       | \$                         |                    | \$ XXXXXX              |  |                     |          |
|   |                                       |                            | 0.00               |                        | 6,315.55                               |                     |          |
| Line 3: Total Contributions (Enter  | )                                     | \$                         |                    | \$ _                   | <del></del>                            |                     |          |
| Line 4: Subtotal (Add lines 1, 2 a  |                                       | \$                         | 1,000.00           | \$                     | 7,072.75                               |                     |          |
| Line 5: Total Expenditures (Enter   | 2)                                    | \$                         | 0.00               | \$                     | 6,072.75                               |                     |          |
| Line 6: Enter Ending Cash Balan   | •                                     | \$                         | 1,000.00           | \$ _                   | 1,000.00                               |                     |          |
| Line 7: Outstanding Debt to Date  | . 0                                   |                            | .00                | · –                    |  |                     |          |
| Life 7. Odistanding Debt to Date  | (Lines amount nom mis 10,             | page 2/                    | Ψ                  |                        |  |                     |          |
| *This same figure should be enter   | ered on line 1 of all reports fil     | ed this calendar year.     |                    |                        |  |                     |          |
| "This is the figure on line 6 of th   | e last Campaign Financial D           | isclosure Report filed. If |                    |                        |  |                     |          |
| Note: The closing cash balance  | for the current reporting peri-       | od appears on the next     | report as          | the beginning cas      | sh on hand                             | l <b>.</b>          |          |
| Si  | ection V                              |                            |                    |                        |  |                     |          |
| Return This Report To:  |                                       |                            |                    |                        |  |                     |          |
| Ben Ysursa  |                                       | Terry Capurso              |                    |                        |  |                     |          |
| Secretary of State  |                                       |                            |                    |                        |  | nformation in this  |          |
| PO Box 83720  |                                       |                            | noise Fi           | nancial Disclasses     | Donast                                 | nagrinad bulan      |          |
| Boise (D 83720-0080   | report is a true, co                  | mplete and correct Cam     | Pardu H            | nariciai disciosure    | Report as                              | required by law.    |          |
| Phone: (208) 334-2852<br>Fax: (208) 334-2282  |                                       | 1                          | /~                 | /                      |  |                     |          |
|   |                                       | -/My                       |                    | The of Clatter of Tax  | ************************************** |                     |          |
|   |                                       |                            | ୍ ଧାପ୍ତମଣା         | ure of Political Trea  | asuiul                                 |                     |          |