



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

C-2  
Rev. 5/11

2012 DEC -3 AM 8:51  
STATE OF IDAHO

**SCANNED**

**Section I**

Name of Candidate or Political Committee and Chairperson <b>Nancy M Lerandeanu</b>		Office Sought (If candidate) <b>Representative</b>	District (if any) <b>7-B</b>
Mailing Address <b>167 105th St.</b>	City and Zip <b>Orofino 83544</b>	Home Phone <b>476-5719</b>	Work Phone <b>476-4568</b>
Name of Political Treasurer <b>Connie Miller</b>			
Mailing Address <b>P.O. Box 163</b>	City and Zip <b>Ahsahka 83520</b>	Home Phone <b>476 5079</b>	Work Phone <b>476-5079</b>

Change of address for: Candidate or Political Committee  Political Treasurer

**Section II**

**TYPE OF REPORT**

This filing is an:  Original  Amendment

This report is for the period from 10 / 23 / 12 through 11 / 30 / 12.

7 Day Pre-Primary Report       30 Day Post-Primary Report       October 10 Pre-General Report

7 Day Pre-General Report       30 Day Post-General Report       Annual Report

Semi-Annual Report (Statewide Candidates Only)

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 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.

**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 Calendar Year*	\$ <u>XXXXXX</u>	\$ <u>935.84</u> 0
Line 2: Enter Beginning Cash Balance**	\$ <u>935.84</u> 954.03	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ <u>245.64</u>	\$ <u>245.64</u> 2503.24
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>1,181.48</u> 1191.67	\$ <u>1,181.48</u> 2503.24
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ <u>1,116.48</u>	\$ <u>1,116.48</u> 2420.05
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ <u>65.00</u> 83.19	\$ <u>65.00</u> 83.19
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ <u>65.00</u>	

\*This same figure should be entered on line 1 of all reports filed this calendar year.

\*\*This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.

Note: The closing cash balance for the current reporting period appears on the next report as the beginning cash on hand.

**Section V**

Return This Report To:  
Ben Yursa  
Secretary of State  
PO Box 83720  
Boise ID 83720-0080  
Phone: (208) 334-2852  
Fax: (208) 334-2282

I, Connie Miller, hereby certify that the information in this  
Name of Political Treasurer

report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

*Connie Miller*

Signature of Political Treasurer

## DETAILED SUMMARY

Name of Candidate or Committee: Nancy M. Lerandeau, Representative Dist 7-B
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Total This Period

### Contributions

①	Unitemized Contributions (\$50 and less)	# of Contributors <u>0</u>	+	\$ 0.00
②	Itemized Contributions (Total of all Schedule A sheets)		+	\$ 148.64
③	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)		+	\$ 97.00
④	Loans (Total of all New Loan amounts from Schedule D sheets)		+	\$ 0.00
⑤	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)		=	\$ 245.64

### Expenditures

⑥	Unitemized Expenditures (Less than \$25)	# of Expenditures <u>1</u>	+	\$ 16.18
⑦	Itemized Expenditures (Total of all Schedule B sheets)		+	\$ 492.66
⑧	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)		+	\$ 97.00
⑨	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)		+	\$ 0.00
⑩	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)		+	\$ 510.64
⑪	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)		=	\$ 1,116.48

### Loans, Credit Cards and Debt

⑫	Outstanding Balance from previous reporting period		+	\$ 113.64
⑬	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)		+	\$ 0.00
⑭	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)		+	\$ 462.00
⑮	Subtotal		=	\$ 575.64
⑯	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)		-	\$ 0.00
⑰	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)		-	\$ 510.64
⑱	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)		=	\$ 65.00

### Pledged Contributions

⑲	Unitemized Pledged Contributions (\$50 and less)	# of Pledges <u>0</u>	+	\$ 0.00
⑳	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)		+	\$ 0.00
㉑	Total Pledged Contributions this period		=	\$ 0.00

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

Name of Candidate or Committee: **Nancy M Lerandean, Representative Dist 7-B**

Date Received	Full Name, Mailing Address and Zip Code of Contributor	Cash or Check
11 / 02 / 12 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	1. IHCA-ICAL PAC 1524 W. Cayuse Creek Dr. Meridian, ID 83848	\$ 100.00 \$ 100.00 Calendar Year-To-Date
11 / 28 / 12 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2. Connie Miller P.O. Box 163 Ahsahka, ID 83520	\$ 48.64 \$ 82.64 Calendar Year-To-Date
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	3.	\$ _____ \$ _____ Calendar Year-To-Date
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	4.	\$ _____ \$ _____ Calendar Year-To-Date
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	5.	\$ _____ \$ _____ Calendar Year-To-Date
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	6.	\$ _____ \$ _____ Calendar Year-To-Date
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	7.	\$ _____ \$ _____ Calendar Year-To-Date
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	8.	\$ _____ \$ _____ Calendar Year-To-Date
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	9.	\$ _____ \$ _____ Calendar Year-To-Date
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	10.	\$ _____ \$ _____ Calendar Year-To-Date
<b>Total This Page:</b>		<b>\$ 148.64</b>

Transfer the combined total of all Schedule A pages to the Detailed Summary on page 2 line 2.

## SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee: Nancy M Lerandean, Representative Dist 7-B

**Purpose Codes**

- |  |   |
|--|---|
| <p>A All Travel Expenses (Airfare, Fuel, Lodging &amp; Mileage)</p> <p>B Broadcast Advertising (Radio, TV &amp; Internet)</p> <p>C Contributions to Candidates &amp; PAC's</p> <p>D Donations &amp; Gifts</p> <p>E Event Expenses</p> <p>F Food &amp; Refreshments</p> <p>G General Operational Expenses</p> <p>L Literature, Brochures, Printing</p> <p>M Management Services</p> | <p>N Newspaper &amp; Other Periodical Advertising</p> <p>O Other Advertising (Yard Signs, Buttons, etc.)</p> <p>P Postage</p> <p>S Surveys &amp; Polls</p> <p>T Tickets (Events)</p> <p>U Utilities</p> <p>W Wages, Salaries, Benefits &amp; Bonuses</p> <p>Y Petition Circulators</p> <p>Z Preparation &amp; Production of Advertising</p> |
|--|---|

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
11 / 06 / 12	1. Idaho Democratic Party 943 W. Overland Rd. Meridian, ID 83642	S	\$ 334.00
11 / 08 / 12	2. Window on the Clearwater P.O. Box 2444 Orofino, ID 83544	N	\$ 35.00
10 / 28 / 12	3. Vista Print eVistaPrint.com on-line order	N	\$ 123.66
/ /	4.		\$
/ /	5.		\$
/ /	6.		\$
/ /	7.		\$
/ /	8.		\$
/ /	9.		\$
/ /	10.		\$
<b>Total This Page:</b>			<b>\$ 492.66</b>

Transfer the combined total of all Schedule B pages to the Detailed Summary on page 2 line 7.

**SCHEDULE C**  
**IN-KIND CONTRIBUTIONS and EXPENDITURES**

Name of Candidate or Committee: Nancy M. Lerandean, Representative, Dist 7-B

**Purpose Codes**

- |  |   |
|--|---|
| <p>A All Travel Expenses (Airfare, Fuel, Lodging &amp; Mileage)</p> <p>B Broadcast Advertising (Radio, TV &amp; Internet)</p> <p>C Contributions to Candidates &amp; PAC's</p> <p>D Donations &amp; Gifts</p> <p>E Event Expenses</p> <p>F Food &amp; Refreshments</p> <p>G General Operational Expenses</p> <p>L Literature, Brochures, Printing</p> <p>M Management Services</p> | <p>N Newspaper &amp; Other Periodical Advertising</p> <p>O Other Advertising (Yard Signs, Buttons, etc.)</p> <p>P Postage</p> <p>S Surveys &amp; Polls</p> <p>T Tickets (Events)</p> <p>U Utilities</p> <p>W Wages, Salaries, Benefits &amp; Bonuses</p> <p>Y Petition Circulators</p> <p>Z Preparation &amp; Production of Advertising</p> |
|--|---|

1.	<u>11</u> / <u>01</u> / <u>12</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code Clearwater County Democrats, Carrie Bird, Treasurer 121 Konkolville Rd Orofino, ID 83544	\$ 82.50 <hr/> \$ 282.50 Calendar Year-To-Date
		Expenditure Name, Mailing Address and Zip Code Clearwater Tribune P.O. Box 71 Orofino, ID 83544	\$ 82.50 Purpose Code N
2.	<u>11</u> / <u>01</u> / <u>12</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code Clwarwater County Democrats, Carrie Bird, Treasurer 121 Konkolville Rd. Orofino, ID 83544	\$ 14.50 <hr/> \$ 297.00 Calendar Year-To-Date
		Expenditure Name, Mailing Address and Zip Code Window on the Clearwater P.O. Box 2444 Orofino, ID 83544	\$ 14.50 Purpose Code N
3.	<u>  </u> / <u>  </u> / <u>  </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code	\$ _____ <hr/> \$ _____ Calendar Year-To-Date
		Expenditure Name, Mailing Address and Zip Code	\$ _____ Purpose Code
4.	<u>  </u> / <u>  </u> / <u>  </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code	\$ _____ <hr/> \$ _____ Calendar Year-To-Date
		Expenditure Name, Mailing Address and Zip Code	\$ _____ Purpose Code
		Expenditure Total: (Transfer the combined total of all Expenditures on Schedule C pages to the Detailed Summary, page 2 line 8)	\$ 97.00
		Contributor Total: (Transfer the combined total of all Contributors on Schedule C pages to the Detailed Summary, page 2 line 3)	\$ 97.00

## SCHEDULE E - CREDIT CARDS and DEBT

Name of Candidate or Committee: **Nancy M Lerandean, Representative Dist. 7-B**

Each incurred expense not yet paid (i.e. credit card purchases and debt) should be listed on a separate line. Each time you make purchases with a credit card or incur debt, it is considered to be a separate item. However, you will maintain a single item for each credit card and add purchases to that item. Each Creditor listed below with a New Debt amount must have a Schedule E-1 accompanying it. The Schedule E-1 lists where and when the debt was incurred.

Credit Cards are considered debt to the campaign. Regardless of whether the credit card is repaid when the statement is received, all credit card transactions will appear on Schedule E and E-1. However, only Repayments of Debt during this reporting period appear in the Expenditure Section of the Detailed Summary Page.

Any creditor(s) with a balance(s) appearing on the last report must be listed below with the amount in the Previous Balance column. Any new debt should be listed in the New Debt column, including any accrued interest. If a payment was made on the debt, list it in the Repayments column. Note: Any debt that was repaid in full in a previous reporting period does not need to be listed. The Outstanding Balance column is the Previous Balance plus New Debt less any Repayments of Debt.

Name, Mailing Address and Zip Code of Creditor (Candidate, Individual or Business)	Previous Balance of debt at the end of the last reporting period	New Debt amount incurred during this reporting period	Repayments of Debt during this reporting period	Balance outstanding at the end of this reporting period
1. LCCU 1626 17th Street Lewiston, ID 83501	0.00	Date: <u>11 / 02 / 12</u> Amount: \$ <u>462.00</u>	Date: <u>11 / 28 / 12</u> Amount: \$ <u>462.00</u>	0.00
2. Connie Miller P.O. Box 163 Ahsahka, ID 83520	113.64	Date: <u>    /    /    </u> Amount: \$ <u>          </u>	Date: <u>11 / 28 / 12</u> Amount: \$ <u>48.64</u>	65.00
3.		Date: <u>    /    /    </u> Amount: \$ <u>          </u>	Date: <u>    /    /    </u> Amount: \$ <u>          </u>	
4.		Date: <u>    /    /    </u> Amount: \$ <u>          </u>	Date: <u>    /    /    </u> Amount: \$ <u>          </u>	
5.		Date: <u>    /    /    </u> Amount: \$ <u>          </u>	Date: <u>    /    /    </u> Amount: \$ <u>          </u>	
6.		Date: <u>    /    /    </u> Amount: \$ <u>          </u>	Date: <u>    /    /    </u> Amount: \$ <u>          </u>	
	Previous	Incurred	Repayments	Ending Balance

Previous Total: \$ 113.64

Incurred Total: \$ 462.00

(Transfer the combined total of all incurred debt to the Detailed Summary, page 2 line 14)

Repayments Total: \$ 510.64

(Transfer the combined total of all debt repayments to the Detailed Summary, page 2 line 10 & 17)

Ending Balance Total: \$ 65.00

**SCHEDULE E-1 - CREDIT CARD and DEBT ITEMIZATION**

Name of Candidate or Committee:

Name of Creditor from Schedule E: **Nancy M Lerandean, Representative Dist. 7-B**

Each Creditor listed on Schedule E with a New Debt amount must have a Schedule E-1 accompanying it. The Schedule E-1 lists where and when the debt was incurred.

**Purpose Codes**

- |  |   |
|--|---|
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) | N Newspaper & Other Periodical Advertising      |
| B Broadcast Advertising (Radio, TV & Internet)           | O Other Advertising (Yard Signs, Buttons, etc.) |
| C Contributions to Candidates & PAC's                    | P Postage                                       |
| D Donations & Gifts                                      | S Surveys & Polls                               |
| E Event Expenses   | T Tickets (Events)                              |
| F Food & Refreshments                                    | U Utilities                                     |
| G General Operational Expenses                           | W Wages, Salaries, Benefits & Bonuses           |
| I Interest Accrued & Finance Charges                     | Y Petition Circulators                          |
| L Literature, Brochures, Printing                        | Z Preparation & Production of Advertising       |
| M Management Services                                    |   |

Date Incurred	Full Name, Mailing Address and Zip Code of Expenditure	Purpose Code	Amount
11 / 02 / 12	1. KORT Radio Station Grangeville, ID 83530	B	462.00
/ /	2.		\$
/ /	3.		\$
/ /	4.		\$
/ /	5.		\$
/ /	6.		\$
/ /	7.		\$
/ /	8.		\$
/ /	9.		\$
<b>Total This Page:</b>			462.00 <del>0.00</del>

The total of itemization for this creditor should equal the new loan amount listed on Schedule E for this creditor.