



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

Section I

Name of Candidate or Political Committee and Chairperson: Lee Wagner; Office Sought: State Rep; District: 3; Mailing Address: 1301 E. 17th Street; City and Zip: Idaho Falls, 83401; Home Phone: 522-4580; Work Phone: 529-5600; Name of Political Treasurer: D. Lynn Smith, CPA, CVA; Mailing Address: P.O. Box 50699; City and Zip: Idaho Falls, 83405; Home Phone: 785-2949; Work Phone: 523-5953

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 11/1/8100 through 12/31/00

- II 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 [X] Annual Report

Is this Report an amendment? [ ] Yes [X] No Is this a Termination Report? [ ] Yes [X] 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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand January 1, Total Contributions, Subtotal, Total Expenditures, and Cash Balance at Close of Period.

\*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: & one [ ] \$ (see attached Schedule C-2A)
Incurred Expenditures during this reporting period but not yet paid: [X] 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 D. Lynn Smith, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Signature of Political Treasurer

### DETAILED SUMMARY PAGE

Name of Candidate or Committee <u>Lee Gagner</u>	Report Coverin the Period From <u>8/00</u> to <u>12/31/00</u>
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#### 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 0      Total Rmount \$ 0

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Uniremized Contriburions (\$50 and less) from top of page	\$ 0.00
Itemized Contriburions (total all Schedule A sheets)	\$ 100.00
Total Conbiburions (also enter this figure on page 1, Section IV, line 3)	\$ 100.00
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than S-25) from top of page	\$ 0.00
Itemized Expenditures (total all Schedule A sheets)	\$ 608.73
Total Expenditures (also enter this figure on page I, Scction IV, line 5)	\$ 608.73

## ITEMIZED CONTRIBUTIONS

of more than Fifty Dollars (\$50.00) this period

/ /

Name of Candidate or Committee  
*Lee Wagner*

		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
11/27/00	1. <i>Blue Cross of Idaho P.O. Box 7408 Boise, ID 83707</i>	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
- / / -		\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
- / / -	3.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
- / / -	4.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
- / / -	5.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
- / A / -	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
- / / -	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
- / / -	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
- / / -	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
A / / -	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>100.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Total This Page (add columns A, B & C)				\$ <u>100.00</u>

ITEMIZED EXPENDITURES

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

111

Name of Candidate or Committee  
*Lee Gagner*

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<i>11/27/00</i>	<i>1. RE/Max Homestead Realty 1301 E. 17th St. Suite 1 Idaho Falls, ID 83404</i>	<i>\$ 56.88</i>	<i>\$</i>
<i>Purpose of Above Expenditure: Reimburse for postage / registration fee for conference</i>			
<i>11/27/00</i>	<i>2. Dr. Tom Trail - Trail for the house 1375 Mountain View Road Moscow, ID 83843</i>	<i>\$ 350.00</i>	<i>\$</i>
<i>Purpose of Above Expenditure: Campaign contribution</i>			
<i>12/12/00</i>	<i>3. Lee Gagner 2555 Fieldstream Idaho Falls, ID 83401</i>	<i>\$ 167.85</i>	<i>\$</i>
<i>Purpose of Above Expenditure: Lodging for legislative business</i>			
<i>12/12/00</i>	<i>4. Lynnea Compton 4097 Forest Glen Dr. Idaho Falls, ID 83406</i>	<i>\$ 34.00</i>	<i>\$</i>
<i>Purpose of Above Expenditure: Campaign typing / computer work</i>			
<i>1 / 1</i>	<i>5.</i>	<i>\$</i>	<i>\$</i>
<i>Purpose of Above Expenditure:</i>			
<i>1 / 1</i>	<i>6.</i>	<i>\$</i>	<i>\$</i>
<i>Purpose of Above Expenditure:</i>			
<i>1 / 1</i>	<i>7.</i>	<i>\$</i>	<i>\$</i>
<i>Purpose of Above Expenditure:</i>			
<i>1 / 1</i>	<i>8.</i>	<i>\$</i>	<i>\$</i>
<i>Purpose of Above Expenditure:</i>			
<i>1 / 1</i>	<i>9.</i>	<i>\$</i>	<i>\$</i>
<i>Purpose of Above Expenditure:</i>			
<i>Subtotals of Columns A &amp; B</i>		<i>\$ 608.73</i>	<i>\$ 0.00</i>
<i>Total This Page (add columns A &amp; B)</i>			<i>\$ 608.73</i>