C-2 Rev. 7/97



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

P.O.Box 2146 CdA, ID 83816 667-1213 763-3326 Name of Political Treasurer Michael J. Bibin, CPA, P.A. Mailing Address City and Zip HomePhone Work Phone 1620 NW Blvd., Ste. B-205 CdA. ID 83816 664-4967 664-6446
Mailing Address Check if address change City and Zip Home Phone 7.65-3326 Name of Political Treasurer Michael J. Bibin, CPA, P.A. Mailing Address Check if address change. City and Zip Home Phone Mork Phone 664-6446 Mailing Address Check if address change. City and Zip Home Phone 664-6446 Mailing Address Check if address change. City and Zip Home Phone 664-6446 Mailing Address Check if address change. City and Zip Home Phone 664-6446 Mailing Address Check if address change. City and Zip Home Phone 664-6446 Mailing Address Check if address change. City and Zip Home Phone 664-6446 Mailing Address City and Zip Home Phone 664-6446 Mailing Address City and Zip Home Phone 664-6446 Mailing Address Home Phone CdA, ID 83816 667-1213 Mork Phone 765-3326 Mork Phone 765-3326 Mork Phone 765-3326 Mork Phone 765-3326 Mork Phone 765-326
Mailing Address P.O.Box 2146 Name of Political Treasurer Michael J. Bibin, CPA, P.A. Mailing Address Check if address change. City and Zip Richard Treasurer Michael J. Bibin, CPA, P.A. Mailing Address Check if address change. City and Zip Rome Phone Work Phone Rome Phone Phone Rome Phone Phone Rome Phon
Name of Political Treasurer Michael J. Bibin, CPA, P.A. Mailing Address City and Zip City and Zip City and Zip City and Zip Free Free Free Free Free Free Free Fre
Michael J. Bibin, CPA, P.A. Mailing Address
Mailing Address
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 1/18 / 00 through 1 2 / 31 / 00 ¬ Day Pre-Primary Report ¬ Day Pre-General Report ¬ Day Pre-General Report ¬ Day Post-Primary Report ¬ Day Post-General Report ¬ Day Post-General Report ¬ October 10 Pre-General Report ¬ Day Post-General 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 1/1 8 / 0 0 through 1 2 / 31 / 0 0 7 Day Pre-Primary Report
Instructional manual for reporting periods and due dates. This report is for the period from 1 1/18 / 00 through 1 2 /31 /00 ☐ 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 (only filed by ballot measure committees) ☐ Is this Report an amendment? ☐ ★ No Is this a Termination Report? ☐ Yes ★ No
□ 30 Day Post-Primary Report □ 30 Day Post-Primary Report □ 30 Day Post-General Report □ 4 Mo
□ 30 Day Post-Primary Report □ 30 Day Post-General Report □ October 10 Pre-General Report □ Sthis Report an amendment? □ ★ No Sthis a Termination Report? □ Yes ★ No
☐ October 10 Pre-General Report ☐ Annual Report (only filed by ballot measure committees) Is this Report an amendment? ☐ ‡ Mo Is this a Termination Report? ☐ Yes ♣ No
<u> </u>
Section III STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES
the appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column 11, 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 COLUMN I COLUMN II This Period Calendar Year to Date
Line 1: Cash on Hand January I, This Year* \$x \times x \tin x \times
Line 2: Enter Cash Balance at Close of Last Reporting Period** \$\frac{3632.20}{3632.20}\$\$\$\$\$\$ xxxxxxx
Line 3: Total Contributions (Enter amount from page 2) \$ 0 \$ 6175.00
Line 4: Subtotal (Add lines 1, 2 and 3) \$\frac{3632.20}{}\$\$ \$\frac{9171.21}{}\$
Line 5: Total Expenditures (Enter amount from page 2) \$\\\\ \frac{45.00}{\}\$\$ \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** \$\frac{3587, 20}{3587, 20}\$
*This same figure should be entered on line 1 of all reports tiled this calendar year. **You must report the cash on hand at both the beginning of the repot-ring 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-2)
Incurred Expenditures during this reporting period but not yet paid: None O S (see attached Schedule C-
Section VI CERTIFICATION Return This Report To:

Pete T. Cenarrusa Secretary of State **PO** Box 83720 Boise ID 83720-0080 lax: (208) 334-2282

__, hereby certify that the information

in this report is a true, complete and correct Campaign Financial Disclosure Report as

required by law.

DETAILED SUMMARY PAGE

Narno of Candidate or Committee	Report Covering the Period						
Jack Riggs	From 11 7 18/00 to 12/31 00						
UNITEMIZED CONTRIBUTIONS Contributions of Fifty Dollars (\$50.00) or Less This Period							
Contributions of Fifty Dollars (350.00) or Less This Period							
Total Total Number 0 Amount	s <u> </u>						
UNITEMIZED EXPENDITURES Expenditures of Less Than Twenty-Five Dollars (\$25.00) 'This Period							
Total Total Number _ 0 Amount \$	0						

		Total This Period,
Number of Schedule A pages Attached		
Contributions		
Uniternized Contributions (\$50 and less) from top of page	s	0
Iremized Contributions (total all Schodule A sheets)	\$	
Total Contributions (also enter this figure on page I, Section IV, line 3)	\$	0

Number of Schedule B pages Attached		
Expenditures	0	
Unitemized Expenditures (less than \$25) from top of page	\$	
Itemized Expenditures (total all Schedule B sheets)	\$ 45.00	
Total Expenditures (also enter this figure on page I. Section IV, line 5)	\$ 45.00	

01-25-2001 09: 37AM FROM MICHAEL BIBIN, C.P.A.

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P. 01

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

SCHEDULE R

Name of Candidate or Committee Jack Riggs

		Column A	Column B			
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)			
_1 2/ 0 6.0 0	Associated Taxpayers of Idaho 802 W. Bannock, Ste. 307 Boise, ID 83701	\$45.00	\$			
Purpose of Above Expenditure: Ray. Meeting						
•	2					
		\$	\$			
Purpose of Abo	ove Expenditure:					
	3.					
		\$	\$			
Purpose of Abo	ove Expenditure:					
	4					
		\$	\$			
Purpose of Abo	ove Experiditure:					
_	5.					
_ / _ / _		\$	\$,			
Purpose of Abo	ve Expen diture:	<u> </u>				
	6					
_ I _ / _		\$	\$			
Purpose of Above Expenditure:						
	7. (
_ / _/		\$	\$- v - w			
Purpose of Above Expenditure:						
	8					
/		\$	\$			
Purpose of Abo	ve Expenditure:					
	9					
		\$	\$			
Purpose of Above Expenditure:						
	Subtotals of Columns A & B	\$45.00	\$			
	Total This Page (add columns A & B)		s <u>45_00</u>			