

C-2  
Rev 7/97



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

*Faxed  
Nov. 7, 00*

Section I

Name of Candidate or Political Committee and Chairperson <i>Clair Cheirrett</i>		Office Sought (if candidate) <i>State Rep</i>	District (if any) <i>32</i>
Mailing Address <i>630 Webster</i>	<input type="checkbox"/> Check if address change.	City and Zip <i>Montpelier 85554</i>	Home Phone <i>847-2259</i>
Name of Political Treasurer <i>Rick DeMarcus</i>			Work Phone <i>847-2015</i>
Mailing Address <i>PO Box 352</i>	<input type="checkbox"/> Check if address change.	City and Zip <i>Georgetown 85239</i>	Home Phone <i>847-3059</i>
			Work Phone

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 *Oct 23/00* through *Nov 17*

- 7 Day Pre-Primary Report
  - 7 Day Pre-General Report
  - Quarterly (April 30)  
(only filed by ballot measure committees)
  - 1 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>0</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>2446.58</u>	\$ <u>xxxxxx</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>2296.00</u>	\$ <u>9063.23</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>4742.58</u>	\$ <u>9063.23</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>4291.75</u>	\$ <u>8612.40</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>450.83</u>	\$ <u>450.83</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  I.\$ \_\_\_\_\_ (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 Rick DeMarcus, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

*[Signature]*  
Signature of Political Treasurer

### DETAILED SUMMARY PAGE

Name of Candidate or Committee <span style="font-size: 1.2em; font-family: cursive;">Clair Cheirrett</span>	Report Covering the Period From <u>10/23/00</u> to <u>11/17/00</u>
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#### UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 122                      Total Amount \$ 846.<sup>00</sup>

#### UNITEMIZED EXPENDITURES

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

Total Number 1                              Total Amount \$ 20

	Total This Period
<u>Number</u> of Schedule A pages Attached	
Contributions	
<b>Unitemized Contributions</b> (\$50 and less) from top of page	\$ <u>846</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>1450</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>2296</u>
<u>Number</u> of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>20</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>4271.75</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>4291.75</u>

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

Name of Candidate or Committee  
M/air\_Cheirrett

		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
11/1/00	1. Woolstenhulme Farms 55-3 RJern.5 St. Montpelier, ID 83254	\$ 100. <sup>00</sup>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/1/00	2. Eight Mile Ranch 1501 Eight Mile Creek Rd. Soda Springs, ID 83267	\$ 250. <sup>00</sup>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/1/00	3. Barbara Niels. 944 E. 800 So. Bountiful, UT 84010	\$ 300. <sup>00</sup>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 800. <sup>00</sup> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/1/00	4. Everett Miles 306 E. Center Grace, ID 83241	\$ 200. <sup>00</sup>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/1/00	5. Grant L. Peterson P.O. Box 329 Grace, ID 83241	\$ 200. <sup>00</sup>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/10	6. Carl Jorgensen 1699 Lloyd Rd. Bancroft, ID 83217	\$ 200. <sup>00</sup>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/1/00	7. Jay Turner 112 W. 1st So. Grace, ID 83241	\$ 100. <sup>00</sup>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/13/00	8. H.W. Rheat & W.B. Mason P.O. Box 69 Partnership Soda Springs, ID 83276	\$ 100. <sup>00</sup>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/1/00	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/1/00	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		\$ 1450. <sup>00</sup>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ 1450. <sup>00</sup>

## SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee  
Clair Cheirrett

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<u>10/24/00</u>	<sup>1</sup> Caribou County Sun 169 So. 1st Soda Springs, ID 83276	\$ <u>200.<sup>00</sup></u>	\$ _____
Purpose of Above Expenditure: <u>Advertising</u>			
<u>10/24/00</u>	<sup>2</sup> News Examiner 847 Washington Montpelier, ID 83254	\$ <u>50.<sup>88</sup>/<sub>100</sub></u>	\$ _____
Purpose of Above Expenditure: <u>Advertising</u>			
<u>10/25/00</u>	<sup>3</sup> Mountain Litho 833 Washington Montpelier, ID 83254	\$ <u>389.<sup>34</sup>/<sub>100</sub></u>	\$ _____
Purpose of Above Expenditure: <u>Printing</u>			
<u>10/28/00</u>	<sup>4</sup> Preston Citizen 75 So. State Preston, ID	\$ <u>150.<sup>00</sup></u>	\$ _____
Purpose of Above Expenditure: <u>Advertising</u>			
<u>10/30/00</u>	<sup>5</sup> News Examiner 847 Washington Montpelier, ID 83264	\$ <u>22.<sup>76</sup>/<sub>100</sub></u>	\$ _____
Purpose of Above Expenditure: <u>Advertising</u>			
<u>10/30/00</u>	<sup>6</sup> KBRV 421 W. 2nd So. Soda Springs, ID 83276	\$ <u>200.<sup>00</sup></u>	\$ _____
Purpose of Above Expenditure: <u>Advertising</u>			
<u>10/30/00</u>	<sup>7</sup> KVSI 24681 U.S. Hwy 89 Montpelier, ID 83254	\$ <u>150.<sup>00</sup></u>	\$ _____
Purpose of Above Expenditure: <u>Advertising</u>			
<u>10/31/00</u>	<sup>8</sup> Custom Printing 116 12th Ave. So. Nampa, ID 83651	\$ <u>278.<sup>55</sup>/<sub>100</sub></u>	\$ _____
Purpose of Above Expenditure: <u>Printing</u>			
<u>10/31/00</u>	U.S. Post Office 804 Grant Montpelier, ID 83254	\$ <u>881.<sup>36</sup>/<sub>100</sub></u>	\$ _____
Purpose of Above Expenditure: <u>Postage</u>			
Subtotals of Columns A & B		\$ <u>2527.82</u>	\$ _____
Total This Page (add columns A & B)			\$ <u>2527.82</u>

