



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

Section I

Name of Candidate or Political Committee and Chairperson <u>Lin Whitworth</u>		Office Sought (if candidate) <u>Senate</u>	District (if any) <u>1</u>
Mailing Address <u>PO Box 412</u>	City and Zip <u>Twin Falls 83245</u>	Home Phone <u>775 35715</u>	Work Phone <u>775 3149</u>
Name of Political Treasurer <u>Brenda L Carroll</u>			
Mailing Address <u>PO Box 412</u>	City and Zip <u>Twin Falls 83245</u>	Home Phone <u>775 3029</u>	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 boxes. See the instructional manual for reporting periods and due dates.

This report is for the period from 05/08/00 through 06/02/00

- | | | |
|--|---|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report | <input type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> Quarterly (April 30)
(only filed by ballot measure committees) |
| <input checked="" type="checkbox"/> 30 Day Post-Primary Report | <input type="checkbox"/> 30 Day Post-General Report | <input type="checkbox"/> Quarterly (July 30)
(only filed by ballot measure committees) |
| <input type="checkbox"/> October 10 Pre-General Report | <input type="checkbox"/> 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>1416.46</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>1766.46</u>	\$ <u>xxxxxx</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>1120.00</u>	\$ <u>1470.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>2886.46</u>	\$ <u>2886.46</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>40.59</u>	\$ <u>40.59</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>2845.87</u>	\$ <u>2845.87</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 \$ _____ (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

Brenda L Carroll, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.
Brenda L Carroll
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee

L N Whitworth

Report Covering the Period

From 05/08/00 to 06/02/00

06/02/00

UNITEMIZED CONTRIBUTIONS

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

Total
Number 1

Total
Amount \$ 20.00

UNITEMIZED EXPENDITURES

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

Total
Number 0

Total
Amount \$ 0-

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>20.00</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>1100.00</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>1120.00</u>
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>0-</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>40.59</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>40.59</u>

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

Name of Candidate or Committee
LIN Whitworth

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
<u>5/10/20</u>	1. <u>Transportation P.O.L. Ed. League</u> <u>14600 Detroit AV</u> <u>Cleveland OH 44107</u>	\$ <u>800⁰⁰</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>5/22/20</u>	2. <u>ICULAC</u> <u>PO Box 5154</u> <u>Boise Id 83705</u>	\$ <u>200</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>5/23/20</u>	3. <u>STEIN Distributing Co INC</u> <u>601 N. Phillip ST</u> <u>Boise Id 83707</u>	\$ <u>100</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	4.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	5.	% _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	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>1100⁰⁰</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ <u>1100⁰⁰</u>

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
LIN WHITWORTH

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
5/11/00	1. <u>LSPS HWY 30 JENKINS ID 83245</u>	\$ <u>40.59</u>	\$
Purpose of Above Expenditure: <u>Postage</u>			
- / /	2.	\$	\$
Purpose of Above Expenditure:			
- / /	3.	\$	\$
Purpose of Above Expenditure:			
- / /	4.	\$	\$
Purpose of Above Expenditure:			
- / - /	5.	\$	\$
Purpose of Above Expenditure:			
- / - /	6.	\$	\$
Purpose of Above Expenditure:			
- / - /	7.	\$	\$
Purpose of Above Expenditure:			
- / /	8.	\$	\$
Purpose of Above Expenditure:			
- / /	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ <u>40.59</u>	\$
Total This Page (add columns A & B)		\$ <u>40.59</u>	