



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE
(Please Print or Type)

Section I

Name of Candidate or Political Committee and Chairperson <i>Mike Mayo Election Committee</i>		Office Sought (if candidate) <i>0000</i>	District (if any) <i>District 14 A</i>
Mailing Address <i>480 N. Plummer Rd</i>	<input type="checkbox"/> Check if address change.	City and Zip <i>Star, Id. 83669</i>	Home Phone <i>SECRET</i>
Name of Political Treasurer <i>Mary E. Hawley</i>		STATE OF IDAHO	
Mailing Address <i>1237 Maple St.</i>	<input checked="" type="checkbox"/> Check if address change.	City and Zip <i>Meridian, Id. 83692</i>	Home Phone <i>888-3250</i>
			Work Phone <i>8343-676-7</i>

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 11/01 / 10/01 through 10/22/00

- | | | |
|--|--|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report | <input checked="" type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> Quarterly (April 30)
(only filed by ballot measure committees) |
| <input type="checkbox"/> 30 Day Post-Primary Report | <input type="checkbox"/> CI 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"/> CI Annual Report | |

Is this Report an amendment? 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.

CI 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*	\$ XXXXXX	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 5,790.16	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 7,125.00	\$ _____
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 12,915.16	\$ _____
Line 5: Total Expenditures (Enter amount from page 2)	\$ 5,939.17	\$ _____
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 6,975.99	\$ _____

*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)

Section VI

CERTIFICATION

Return This Report To:
Pete T. Cenarrusa
Secretary of State
PO Box 83720
Boise ID 83720-0080
fax: (208) 334-2282

I Mary E. Hawley, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Mary E. Hawley
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee <i>Mike Moyle</i>	Report Covering the Period From ___/___/___ to ___/___/___
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UNITEMIZED CONTRIBUTIONS

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

Total Number _____	Total Amount \$ <u>- 0</u> --
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UNITEMIZED EXPENDITURES

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

Total Number _____	Total Amount \$ <u>- 0</u> --
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	Total This Period
Number of Schedule A pages Attached	<i>3 pages</i>
Contributions	<i>7,125.00</i>
Unitemized Contributions (\$50 and less) from top of page	\$
Itemized Contributions (total all Schedule A sheets)	\$
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$
Number of Schedule B pages Attached	<i>5,931.17</i>
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$

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

Name of Candidate or Committee
Mike Mayo

		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
<u>10/21/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	1. <u>Micron Tech, Inc.</u> <u>8000 S. Federal Way</u> <u>Boise, Idaho 83706-0006</u>	\$ <u>1,000.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
<u>10/05/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2. <u>Coeurd'Alene Mine Corp</u> <u>505 Front Ave.</u> <u>CDA, Id. 83814</u>	\$ <u>300.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
<u>10/2/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	3. <u>Carter-Wallace, Inc.</u> <u>Half Acre Rd.</u> <u>Cherryburg, New Jersey 08512</u>	\$ <u>250.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
<u>10/06/00</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>Peter + Kathryn Jensen</u> <u>1615 12th Ave. Rd.</u> <u>Nampa, Id. 83686</u>	\$ <u>75.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
<u>10/06/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	5. <u>Idaho Society of Ophthalmology</u> <u>90 Eye Physicians of Idaho</u> <u>1615 12th Ave. Rd.</u> <u>Nampa, Id. 83686</u>	\$ <u>250.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
<u>10/10/00</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	6. <u>Direns Pureley</u> <u>Park Place 227 No. 6th Suite 200</u> <u>Boise, Id. 83701</u>	\$ <u>250.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
<u>10/10/00</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	7. <u>Idaho Assoc. of Realtors, Inc.</u> <u>1450 W. Bascock</u> <u>Boise, Id. 83702</u>	\$ <u>200.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
<u>10/11/00</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	8. <u>Crowx Political Action Committee</u> <u>P.O. Box 5756 (Wines Forks)</u> <u>Boise, Id. 83705</u>	\$ <u>100.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
<u>10/13/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9. <u>C. Jean Krang</u> <u>Dr. James W. Krang</u> <u>2404 N. 24th</u> <u>Boise, Id. 83702</u>	\$ <u>50.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
<u>10/20/00</u> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	10. <u>Michael or Shirley Sancholetania</u> <u>22480 Duff Lane</u> <u>Middle, Id. 83644</u>	\$ <u>50.00</u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year to Date
Subtotals of Columns A, B & C		\$ <u>2,525.00</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ _____

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

Name of Candidate or Committee
Mike Monrö

		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
<u>10/20/00</u>	¹ Inter Mountain Capital Corp. P.O. Box Boise, Id. 83711-4305	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/12/00</u>	² Building Contractors Assoc. of Southwest Id. (Pac) 6206 N. Discovery Way, Suite A Boise, Id. 83713	\$ <u>500.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/19/00</u>	³ Zeneva Ab. Products Inc. 1800 Concord Pike Wilmington, DE 19850-5458	\$ <u>250.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/18/00</u>	⁴ Philip Morris Mgmt Corp 120 Park Ave. New York, N.Y. 10017-5592	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/2/00</u>	⁵ Idaho Healthcare Assoc (Pac) 802 W. Bannock, Suite 304 Boise, Id. 83702	\$ <u>200.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/20/00</u>	⁶ Adusta Corp P.O. Box 3727 Spokane, WA 99220-3727	\$ <u>250.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/16/00</u>	⁷ Inter Mountain Industries, Inc. P.O. Box 7608 Boise, Id. 83707	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/1/00</u>	⁸ Idaho Business Pac, Inc. P.O. Box 1111 Boise, Id. 83701	\$ <u>1,000.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/17/00</u>	⁹ J.R. Simplot P.O. Box 27 Boise, Id. 83707	\$ <u>500.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/22/00</u>	¹⁰ IAC/PAC P.O. Box 1375 Boise, Id. 83701	\$ <u>250.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ <u>3,250</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)		\$ _____	\$ _____	\$ _____

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

Name of Candidate or Committee
Mike Moyler

		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
<u>10/20/00</u>	<u>1 Idaho Cattle Assoc. Cattle Pac. P.O. Box 15397 - Boise, Id. 83715 2120 Airport - Boise Id. 83705</u>	\$ <u>150.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> CI Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/10/00</u>	<u>2 NFIB - IDAHO SAFE TRUST 1201 F Street, NW, Suite 200 Washington, DC 20004</u>	\$ <u>300.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> CI Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/12/00</u>	<u>3 Idaho Assoc. of Chiropractic Physicians (IACP) P.O. Box 1863 Boise, ID 83701</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/05/00</u>	<u>4 LaPac - Idaho P.O. Box 1832 Idaho Falls, ID 83403</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/06/00</u>	<u>5 Union Pacific Railroad % Govt Affairs 1416 Dodge St. Rm 801 OMAHA, NE 68179</u>	\$ <u>600.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/18/00</u>	<u>6 On the River RV Park B/MOR Inc 6000 N. Glenwood Boise, Id. 83714</u>	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/18/00</u>	<u>7. _____</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> CI Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/18/00</u>	<u>8. _____</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/18/00</u>	<u>_____</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/18/00</u>	<u>_____</u>	\$ _____	\$ _____	\$ _____
<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>1350.00</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)		\$ _____	\$ _____	\$ _____

SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee _____

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10/22/06	1. ESP Printing + Mailing Box 3415 Boise, Id. 83703-0415	\$3,012.20	
Purpose of Above Expenditure: <i>Mailing</i>			
10/22/06	2. Rep. Julie Ellsworth Boise, Idaho	\$ 500.00	
Purpose of Above Expenditure: <i>Campaign Contribution</i>			
10/21/06	3. Treasure Craft 807 Deacon St. Caldwell, Id. 83605	\$ 432.00	
Purpose of Above Expenditure: <i>Signs</i>			
10/09/06	4. Evans Building Center 931 E. State St. Eagle, Id. 83614	\$ 37.80	
Purpose of Above Expenditure: <i>Sticking Signs</i>			
10/06/06	5. Evans Building Center 931 E. State St. Caldwell, Id. 83605	\$ 319.61	
Purpose of Above Expenditure: <i>Posts & Signs</i>			
10/22/06	6. Alexandra Clark 10801 Emerald Boise, Id. 83713	\$ 1,629.56	
Purpose of Above Expenditure: <i>Signs</i>		5,931.17	
/ /	7	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
/ /	8.	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
/ /	9.	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
Subtotals of Columns A & B		\$ _____	\$ _____
Total This Page (add columns A & B)			\$ _____