c-2 Rev.7/97



L DISCLOSURE REPORT ARY PAGE

rint or Type)

| | CAMPAIGN FINANCIA |
|-----|-------------------|
| | SUMMA |
| | (Please Pr |
| n I | |

| Section 1 | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| Name of Candidate or Political Co | mmittee and Chairperson | ĬÂ. | | Office Sought (if candidate) | District (if any) |
| Mailing, Address | , L'Check it address change. | City and Zip | | Home Phone | Work Phone |
| HCI, BOX | 338-D | 338 | 77 | 267-6526 | |
| Name of Political Treasurer ROSEMARIE E, REICHERT STATE OF IDAHO | | | | | |
| Mailing Address | ☐ Check if address change. | City and Zip | 83809 | Home Phone | Work Phone |
| RO, DOX T | <u> フソ </u> | Bonners | Terry | 267-9319 | , |
| Section II | 4 | TYPE OF R | | . 1 . 1 1 | handar) Coodh |
| instructional manual for rep | 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 7 Day Pre-Primar | ry Report | Day Pre-Gener | al Report | ☐ Quarterly (April 30) (only filed by ballot mea | usure committees) |
| Cl 30 Day Post-Prim | nary Report Cl 3 | 30 Day Post-Ger | neral Report | | isure committees) |
| ☐ October 10 Pre-G | eneral Report | annual Report | | Quarterly (July 30) (only filed by ballot mea | sure committees) |
| Is this Report a | n amendment? | No | Is this a | Termination Report? □ | Yes No |
| Section III | STATEMENT OF N | O CONTRIBU | TIONS OR I | 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. Cl I hereby certify that I have received no contributions and have made no expenditures during this reporting period from / / through / / . | | | | | |
| Section IV | | | | | |
| To reach your Calendar Yea figures to the Column II fig | | | n I 💢 | COLUMN I This Period Cale | COLUMN II endar Year to Date |
| Line 1: Cash on Hand Janua Line 2: Enter Cash Balance Line 3: Total Contributions Line 4: Subtotal (Add lines Line 5: Total Expenditures (Line 6: Cash Balance at Clo | at Close of Last Reporting (Enter amount from page 1, 2 and 3) (Enter amount from page 2) (See of Period (Subtract lines) the entered on line 1 of all reports | 2) 2) 2) 2 5 from line 4)* ports filed this c | \$ | XXXXXX \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | XXXXXX 6:00 6.00 6.00 |
| **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: See attached Schedule C-2B) | | | | | |
| | Section VI | | CERTIFICA | ATION | |
| Return This Report To: | . D. | Individe | - 0,1 | 4 | |
| Pete T. Cenarrusa Secretary of State | 1 Kosei | (name of Political T | reasurer) | · · | y that the information |
| PO Box 83720 | • | • | ete and correct | t Campaign Financial Disc | closure Report as |
| Boise ID 83720-0080 fax: (208) 334-2282 | required by la | aw. | | 0.1 | |
| 1uA. (200) 334-2202 | | 1/ Drong | 0111 6 | Vair Lind | |
| 1 | | Cin | nature of Police | ical Transver | |

DETAILED SUMMARY PAGE

| Name of Candidate or Committee REICHERT, FRANK M. | Report Covering the Period From 10/10/00 to 10/31/00 | | | |
|---------------------------------------------------------------------------------------------|------------------------------------------------------|--|--|--|
| UNITEMIZED CONTRIBUTION Contributions of Fifty Dollars (\$50.00) or Less T | his Period | | | |
| Total Total Number Amount \$ | 00 | | | |
| UNITEMIZED EXPENDITURES Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period | | | | |
| Total Total Number Amount \$ 6. | 00 | | | |

| | Total This Period |
|----------------------------------------------------------------------------|-------------------|
| Number of Schedule A pages Attached | |
| Contributions | |
| Unitemized Contributions (\$50 and less) from top of page | \$ 6,00 |
| Itemized Contributions (total all Schedule A sheets) | \$ 6 |
| Total Contributions (also enter this figure on page 1, Section IV, line 3) | \$6,00 |
| | |
| Mumber of Schedule B pages Attached | |
| Expenditures | |
| Unitemized Expenditures (less than \$25) from top of page | \$ 6,00 |
| Itemized Expenditures (total all Schedule B sheets) | \$ 0 |
| Total Expenditures (also enter this figure on page 1, Section IV, line 5) | \$6,00 |