



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

Section I

Name of Candidate or Political Committee and Chairperson <u>Donna H Boe</u>		Office Sought (if candidate) <u>State Representative</u>	District (if any) <u>34 A</u>
Mailing Address <input type="checkbox"/> Check if address change. <u>226 S 16th Ave</u>	City and Zip <u>Pocatello, 83201</u>	Home Phone <u>233-5651</u>	Work Phone <u>233-5651</u>
Name of Political Treasurer <u>Michael Rowe</u>		SECRETARY OF STATE STATE OF IDAHO	
Mailing Address <input type="checkbox"/> Check if address change. <u>208 S 13th Ave</u>	City and Zip <u>Pocatello, 83201</u>	Home Phone <u>232-6906</u>	Work Phone <u>236-6160</u>

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 1/1/01 through 12/31/01

- | | | |
|--|---|--|
| <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 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 checked="" 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*	\$ XXXXXX	\$ 2134 ⁶²
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 2134 ⁶²	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 717 ⁰³	\$ 717 ⁰³
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 2851 ⁶²	\$ 2851 ⁶⁵
Line 5: Total Expenditures (Enter amount from page 2)	\$ 1840 ³¹	\$ 1840 ³¹
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 1011 ³⁴	\$ 1011 ³⁴

*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 Michael Rowe, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Michael Rowe
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee <u>Donna H. Tsou</u>	Report Covering the Period From <u>1/1/01</u> to <u>12/31/01</u>
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UNITEMIZED CONTRIBUTIONS

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

Total Number <u>3</u>	Total Amount \$ <u>122⁰³</u>
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UNITEMIZED EXPENDITURES

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

Total Number <u>3</u>	Total Amount \$ <u>36⁴⁴</u>
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	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 122 ⁰³
Itemized Contributions (total all Schedule A sheets)	\$ 595 ⁰⁰
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 717 ⁰³
<u>2</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 36 ⁴⁴
Itemized Expenditures (total all Schedule B sheets)	\$ 1803 ⁰⁷
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 1840 ³¹

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

Name of Candidate or Committee
Donna H Boe

		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>5/1/01</u>	1. Donna Boe 226 S 16th Ave Pocatello, ID 83201	\$ <u>77⁰⁰</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>77⁰⁰</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>6/7/01</u>	2. Bennech County Democratic Central Committee 520 Skyline Dr Pocatello, ID 83204 (share of money from fundraiser)	\$ <u>54⁵⁴</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>54⁵⁴</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>6/7/01</u>	3. Bennech County Democratic Central Committee 520 Skyline Dr Pocatello, ID 83204 (reimbursement for fundraiser costs)	\$ <u>463⁴⁶</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>518⁰⁰</u> 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>595⁰⁰</u>	\$ <u>0⁰⁰</u>	\$ <u>0⁰⁰</u>
Total This Page (add columns A, B & C)				\$ <u>595⁰⁰</u>

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
Donna H Boe

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
<u>2/11/01</u>	1. Idaho State Democratic Party P.O. Box 445 Boise, ID 83702	\$ <u>150⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Tickets for Jackson-Jefferson Dinner fundraiser</u>			
<u>4/9/01</u>	2. Postmaster 730 E Clark St Pocatello, ID 83201	\$ <u>29²⁴</u>	\$ _____
Purpose of Above Expenditure: <u>Postage for returned letters</u>			
<u>4/16/01</u>	3. Postmaster 730 E Clark St Pocatello, ID 83201	\$ <u>386⁴⁶</u>	\$ _____
Purpose of Above Expenditure: <u>Postage for fundraiser invitations (reimbursed 7 Jun 01)</u>			
<u>5/1/01</u>	4. Office Max 1134 Yellowstone Ave Pocatello, ID 83201	\$ <u>77⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Supplies for fundraiser (reimbursed 7 Jun 01)</u>			
<u>5/8/01</u>	5. Postmaster 730 E Clark St Pocatello, ID 83201	\$ <u>418⁵⁹</u>	\$ _____
Purpose of Above Expenditure: <u>Postage to mail newsletter</u>			
<u>5/21/01</u>	6. Litho Printing, Inc 146 S 4th Ave Pocatello, ID 83201	\$ <u>363⁴¹</u>	\$ _____
Purpose of Above Expenditure: <u>Newsletter printing</u>			
<u>5/21/01</u>	7. Idaho State Democratic Party P.O. Box 445 Boise, ID 83702	\$ <u>49⁰²</u>	\$ _____
Purpose of Above Expenditure: <u>Address labels</u>			
<u>9/7/01</u>	8. Idaho State University Program Board Campus Box 8118 Pocatello, ID 83209	\$ <u>40⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Registration for homecoming parade</u>			
<u>10/14/01</u>	9. Stallings for City Council 2288 Elmone Pocatello, ID 83201	\$ <u>50⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Campaign contribution</u>			
Subtotals of Columns A & B		\$ <u>1563⁷²</u>	\$ <u>0⁰⁰</u>
Total This Page (add columns A & B)		\$ <u>1563⁷²</u>	

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
Donna H Boe

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<u>10/14/01</u>	1. Chase for Mayor 4985 Clearview Pocatello, ID 83204	\$ <u>100⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Campaign contribution</u>			
<u>10/28/01</u>	2. Evelyn Hitchcock 1492 Los Altos Way Pocatello, ID 83201	\$ <u>40⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Computer work</u>			
<u>11/1/01</u>	3. Litho Printing 146 S 4th Ave Pocatello, ID 83201	\$ <u>66¹⁵</u>	\$ _____
Purpose of Above Expenditure: <u>Letterhead</u>			
<u>11/7/01</u>	4. Postmaster 730 E Clark St Pocatello, ID 83201	\$ <u>34⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Stamps</u>			
<u> / / </u>	5.	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u> / / </u>	6.	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u> / / </u>	7.	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u> / / </u>	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u> / / </u>	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ <u>240¹⁵</u>	\$ <u>0⁰⁰</u>
Total This Page (add columns A & B)			\$ <u>240¹⁵</u>