



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

**Section I**

Name of Candidate or Political Committee and Chairperson <b>KATHALEEN WADDELL FOR HOUSE</b>		Office Sought (if candidate) <b>HOUSE SEAT B</b>	District (if any) <b>15</b>
Mailing Address <input type="checkbox"/> Check if address change. <b>10124 CLARKSON PLACE</b>	City and Zip <b>BOISE 83704</b>	Home Phone <b>208-377-0376</b>	Work Phone <b>AM 8:52 NA</b>
Name of Political Treasurer <b>KAREN A McALISTER</b>		DEC 5 2002 STATE OF IDAHO	
Mailing Address <input type="checkbox"/> Check if address change. <b>588 E RIVER QUARRY CT</b>	City and Zip <b>EAGLE 83616</b>	Home Phone <b>208-938-3738</b>	Work Phone <b>NA</b>

**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 10 / 21 / 02 through 11 / 15 / 02

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

	<b>COLUMN I This Period</b>	<b>COLUMN II Calendar Year to Date</b>
Line 1: Cash on Hand January 1, This Year*	\$ <u>XXXXXX</u>	\$ <u>00.00</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>1,420.71</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>1,204.09</u>	\$ <u>2,624.80</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>2,624.80</u>	\$ <u>2,624.80</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>1,607.11</u>	\$ <u>1,607.11</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>1,017.69</u>	\$ <u>1,017.69</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  \$ 1,000.00 (see attached Schedule C-2B)

**Section VI**

**CERTIFICATION**

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

*Karen A. McAlister*  
Signature of Political Treasurer

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

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <b>KATHALEEN WADDELL FOR HOUSE</b>	Report Covering the Period From <u>10 / 21 / 02</u> to <u>11 / 15 / 02</u>
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### UNITEMIZED CONTRIBUTIONS

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

Total Number 2                      Total Amount \$ 15.11

### UNITEMIZED EXPENDITURES

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

Total Number \_\_\_\_\_                      Total Amount \$ \_\_\_\_\_

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ 15.11
Itemized Contributions (total all Schedule A sheets)	\$ 1,188.98
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 1,204.09
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 0
Itemized Expenditures (total all Schedule B sheets)	\$ 1,607.11
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 1,607.11

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

Name of Candidate or Committee  
**KATHALEEN WADDELL FOR HOUSE**

		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
<del>10/21/02</del>	1. House Democrats (Ken Robison) 1119 N. 12th Street Boise, ID 83702	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
10 / 21 / 02	2. Restore Representative Gov P.O. Box 796 Ketchum, ID 83340	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 250.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
10/21 / 02	3. Gary & Kathy Waddell 10124 Clarkson Place Boise, ID 83704	\$ _____	\$ _____	\$ 500.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ 500.00 <small>Calendar Year to Date</small>
10/25/02	4. Benny Antunes 91 N. Taylor St. Nampa, ID 83687	\$ 335.19	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 335.19 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
10 / 21 / 02	5. Copy Express 650 E State Street Eagle, ID 83616	\$ _____	\$ 153.79	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ 269.79 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
/ /	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
/ /	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
/ /	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
/ /	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
/ /	10.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
Subtotals of Columns A, B & C		\$ 535.19	\$ 153.79	\$ 500.00
Total This Page (add columns A, B & C)				\$ 1,188.98

**SCHEDULE B**  
**ITEMIZED EXPENDITURES**  
of Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee <b>KATHALEEN WADDELL FOR HOUSE</b>
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		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10/21/02	1. Copy Express 650 E State Street, Eagle, ID 83616	\$ 1,453.32	\$ 153.79
Purpose of Above Expenditure: tri-fold flyers & envelopes			
/ /	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		\$ 1,453.32	\$ 153.79
Total This Page (add columns A & B)			\$ 1,607.11

**SCHEDULE C-2B  
EXPENDITURES INCURRED BUT NOT YET PAID**

Name of Candidate or Committee <b>KATHALEEN WADDELL FOR HOUSE</b>	Report Covering the Period From <u>10 / 21 / 02</u> to <u>11 / 15 / 02</u>
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**Directions:** Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service, but did not make payment before the end of the reporting period. Do not include these entries on Schedule B until you actually make payment.

<b>Line 1: Incurred Expenditures of Less Than \$25.00 This Period:</b>	Total Number <u>  1  </u>	Total Amount \$ <u>1,000.</u>
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**Incurred Expenditures of \$25.00 or More This Period:**

Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	Amount Incurred
10/21/02 / /	1. KATHALEEN WADDELL 10124 CLARKSON PLACE BOISE, ID 83704	\$ 1,000.00 est
<b>Purpose of Above Expenditure:</b> bulk mailing costs		
/ /	2.	
<b>Purpose of Above Expenditure:</b>		
/ /	3.	
<b>Purpose of Above Expenditure:</b>		
/ /	4.	
<b>Purpose of Above Expenditure:</b>		
/ /	5.	
<b>Purpose of Above Expenditure:</b>		
/ /	6.	
<b>Purpose of Above Expenditure:</b>		
/ /	7.	
<b>Purpose of Above Expenditure:</b>		
/ /	8.	
<b>Purpose of Above Expenditure:</b>		

Line 2: Total Amount of Incurred Expenditures \$25.00 or more	\$ <u>1,000.00</u>
Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1)	\$ _____
Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Section V, page 1.	\$ <u>1,000.00</u>