



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

Section I

Name of Candidate or Political Committee and Chairperson Dennis M. Lake		Office Sought (if candidate) St. Rep.	District (if any) 28
Mailing Address 830 Taber Rd.	<input type="checkbox"/> Check if address change.	City and Zip Blackfoot 83221	Home Phone 681-4967
Name of Political Treasurer Luann Lake			
Mailing Address 830 Taber Rd.	<input type="checkbox"/> Check if address change.	City and Zip Blackfoot 83221	Home Phone 681-4967

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)
(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*	\$ XXXXXX	\$ 2,732.98
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 1,133.91	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 1,050.00	\$ 4,100.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 2,183.91	\$ 6,832.98
Line 5: Total Expenditures (Enter amount from page 2)	\$ 986.80	\$ 5,635.87
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 1,197.11	\$ 1,197.11

*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

I Luann Lake (Name of Political Treasurer), hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Luann Lake
Signature of Political Treasurer

POSTED

DETAILED SUMMARY PAGE

Name of Candidate or Committee Dennis M. Lake	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 <u> 2 </u>	Total Amount <u>\$100.00</u>

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number _____	Total Amount \$ _____

	Total This Period
____ Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 100.00
Itemized Contributions (total all Schedule A sheets)	\$ 950.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 1,050.00
____ Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$ 986.80
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 986.80

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

Name of Candidate or Committee
Dennis M. Lake

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>10/22/02</u>	1. Pharmaceutical Research and Manufacturers of Am. 1100 15th st, NW Washington DC 20005	\$ <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>10/22/02</u>	2. Potato Political Action Com PO Box 919 Blackfoot, Id 83221	\$ <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>10/25/02</u>	3. Idaho Milk Pac PO Box 2751 Boise, Id 83701	\$ <u>150.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/25/02</u>	4. LUPAC-Idaho PO Box 1832 Idaho Falls, Id 83403	\$ <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>10/29/02</u>	5. Employers Resource 1301 S. Vista, Suite 200 Boise, Id 83705	\$ <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>11/2/02</u>	6. Eli Lilly & Co. 1001 Hoff Bldg. PO Box 1703 Boise, Id 83701	\$ <u>150.00</u>	\$ _____	\$ _____
<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>950.00</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)		<u>950.00</u>	\$ _____	\$ _____

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

Name of Candidate or Committee
Dennis M. Lake

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
10/28/02	1. The Morning News PO Box 70 Blackfoot, Id 83221	\$ 283.80	\$
Purpose of Above Expenditure: Newspaper Ad			
10/29/02	2. Pioneer Publications PO Box P Shelley, Id 83274	\$ 158.00	\$
Purpose of Above Expenditure: Newspaper Ad			
11/1/02	3. The Morning News PO Box 70 Blackfoot, Id 83221	\$ 396.00	\$
Purpose of Above Expenditure: Ad			
11/6/02	4. Pioneer Publications	\$ 50.00	\$
Purpose of Above Expenditure: Ad			
11/6/02	5. The Morning News	\$ 99.00	\$
Purpose of Above Expenditure: Ad			
/ /	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		\$ 986.80	\$
Total This Page (add columns A & B)		986.80	\$