



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

Section I

Name of Candidate or Political Committee and Chairperson MAURLEEN MC FADDEN		Office Sought (if candidate) REPRESENTATIVE	District (if any) 83 B
Mailing Address <input type="checkbox"/> Check if address change. 2255 BALTIC AVENUE	City and Zip IDAHO FALLS 83404	Home Phone 208-522-2080	Work Phone
Name of Political Treasurer HAROLD L. LATIN			
Mailing Address <input type="checkbox"/> Check if address change. 1365 MOJAVE ST.	City and Zip IDAHO FALLS 83404	Home Phone 208 522-7143	Work Phone

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 type="checkbox"/> 30 Day Post-Primary Report | <input checked="" 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	\$ -0-
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 401986	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 230 00	\$ 12,404.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 4,249.86	\$ 12,404.00
Line 5: Total Expenditures (Enter amount from page 2)	\$ 4,232.44	\$ 12,386.58
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 17.42	\$ 17.42

*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)

POSTED

Section VI

CERTIFICATION

I HAROLD L. LATIN (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.

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 MAURLEEN MC FADDEN	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>8</u>	Total Amount \$ <u>230.00</u>

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>0</u>	Total Amount \$ _____

	Total This Period
____ Number of Schedule A pages Attached	0
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 230.00
Itemized Contributions (total all Schedule A sheets)	\$ -0-
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 230.00
____ Number of Schedule B pages Attached	1
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ -0-
Itemized Expenditures (total all Schedule B sheets)	\$ 4,232.44
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 4,232.44

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

Name of Candidate or Committee
MAURLEN MC FADDEN

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
10, 21, 02	1. POST REGISTER 333 NORTHGATE MILE, IDAHO FALLS ID 83401	\$ 492.45	\$

Purpose of Above Expenditure: **ADVERTISING**

10, 25, 02	2. FALLS PRINTING 180 E. 1ST STREET IDAHO FALLS, ID 83401	\$ 377.58	\$
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Purpose of Above Expenditure: **LETTERS AND ENVELOPES**

10, 29, 02	3. POST REGISTER	\$ 1,581.46	\$
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Purpose of Above Expenditure: **ADVERTISING**

10, 29, 02	4. SIMMONS MEDIA P.O. Box 679, BLACKFUT, IDAHO 83221	\$ 1,078.00	\$
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Purpose of Above Expenditure: **RADIO ADS**

10, 29, 02	5. POST MASTER IDAHO FALLS, ID 83401	\$ 416.69	\$
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Purpose of Above Expenditure: **MAILING**

11, 4, 02	6. MAURLEN MC FADDEN 2255 BALTIC AVE, IDAHO FALLS, ID 83404	\$ 63.11	\$
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Purpose of Above Expenditure: **REIMBURSE FOR PAYMENT MADE FOR YARD SIGN POSTS**

11, 15, 02	7. BONNEVILLE COUNTY DEMOCRAT P.O. Box 50621 IDAHO FALLS ID 83405	\$ 100.00	\$
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Purpose of Above Expenditure: **PARTIAL IN POST REGISTER**

11, 15, 02	8. MAURLEN MC FADDEN	\$ 123.15	\$
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Purpose of Above Expenditure: **REIMBURSE FOR PAYMENTS MADE FOR COPIING, NOTES AND SUPPLIES**

1, 1, 1	9.	\$	\$
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Purpose of Above Expenditure:

Subtotals of Columns A & B		\$ 4232.44	\$
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Total This Page (add columns A & B)		\$ 4232.44	\$
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