

C-2 Rev. 7/97



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

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson (William T. "Bill" Sali), Office Sought (House of Rep), District (21A), Mailing Address (175 Linke Ct.), City and Zip (Kuna 83634), Home Phone (922-4865), Work Phone (922-5377), Name of Political Treasurer (Terry Sali), and their respective contact information.

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 05/13/02 through 06/07/02

- Checkboxes for report types: 7 Day Pre-Primary Report, 7 Day Pre-General Report, Quarterly (April 30), 30 Day Post-Primary Report, 30 Day Post-General Report, Quarterly (July 30), October 10 Pre-General Report, 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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand January 1, Cash Balance at Close of Last Reporting Period, Total Contributions, Subtotal, Total Expenditures, and Cash Balance at Close of Period.

\*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 [ ] \$ 956.55 (see attached Schedule C-2B)

Return This Report To: Pete T. Carreras Secretary of State PO Box 83720 Boise ID 83720-0000 fax: (208) 334-2282

Section VI

CERTIFICATION

I Terry Sali, Secretary 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 (Handwritten signature of Terry Sali)

**DETAILED SUMMARY PAGE**

Name of Candidate or Committee <u>William T. "Bill" Sali</u>	Report Covering the Period From <u>05/13/02</u> to <u>06/07/02</u>
---	---

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

Total Number	<u>6</u>	Total Amount \$	<u>225.00</u>
--------------	----------	-----------------	---------------

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

Total Number	<u>69</u>	Total Amount \$	<u>799.54</u>
--------------	-----------	-----------------	---------------

	Total This Period
<u>3</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>225.00</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>9150.00</u>
<b>Total Contributions (also enter this figure on page 1, Section IV, line 3)</b>	\$ <u>9375.00</u>
<u>5</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>799.54</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>5903.22</u>
<b>Total Expenditures (also enter this figure on page 1, Section IV, line 5)</b>	\$ <u>6702.76</u>

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

Page 1 of 3

Name of Candidate or Committee  
William T "Bill" Sali

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Leader	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
<u>5/13/02</u>	<sup>1</sup> Idaho Alliance for Naturopathic 5333 W Franklin Rd. # B Boise, Id 83705	\$ <u>250.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/14/02</u>	<sup>2</sup> Stanley B. Leis Rebecca A. Smiley-Leis 372 E. Woodlander ct. Eagle, ID 83616	\$ <u>100.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/14/02</u>	<sup>3</sup> Lorraine or John P. Priddy 1400 Box 4817 Boise, ID 83711	\$ <u>1,000.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/15/02</u>	<sup>4</sup> Edward D Priddy P.O. Box 4817 Boise, ID 83711	\$ <u>1,000.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/14/02</u>	<sup>5</sup> Westcare Management, Inc. 3155 River Rd. S. Ste 100 Salem, OR 97302	\$ <u>1,000.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/15/02</u>	<sup>6</sup> Yellowstone Care Ct., Inc. 3250 Rollandet Idaho Falls, ID 83402	\$ <u>1,000.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/15/02</u>	<sup>7</sup> Preferred Community Homes, Inc. 1323 E. 1st Street Meridian, ID 83642	\$ <u>1,000.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/15/02</u>	<sup>8</sup> Belmont Management, Inc. 3625 Vaughn Street Pocatello, ID 83204	\$ <u>1,000.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/29/02</u>	<sup>9</sup> Idaho Healthcare, Assoc. 802 W. Bannock Suite 304 Boise, ID 83702	\$ <u>200.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/20/02</u>	<sup>10</sup> IHA/PAC P.O. Box 1278 Boise, ID 83701	\$ <u>300.00</u>	\$ _____	\$ _____
<input checked="" 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>6850.00</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ <u>6850.00</u>

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

Page **213**

Name of Contributor or Contributor  
**William T. "Bill" Sali**

Date/Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A Cash or Check	Column B In-Kind (non-monetary)	Column C Lemon
6/7/02	Idaho Pediatric Medical Assoc. 270 N. 27th St. B Boise, ID 83702	\$ 250.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5/23/02	Clearwater Care Center 158 Blake St. N. Twin Falls, ID 83301	\$ 100.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5/23/02	ICULAC P.O. Box 5158 Boise, ID 83705	\$ 100.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5/23/02	NRA Political Victory Fund 11250 Waples Mill Rd. Fairfax, VA 22030	\$ 400.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5/21/02	Exceptional child center, Inc. DBA Center for Independent Living 158 Blake St. N. Twin Falls, ID 83301	\$ 100.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5/20/02	Idaho Retail Action Council 1109 Main St. Mezzanine B Boise, ID 83702	\$ 150.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5/17/02	Communicare Inc. 4010 Franklin, Unit F Meridian, ID 83642	\$ 300.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5/16/02	Heritage House 2310 Rice Ave. Caldwell, ID 83605	\$ 100.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5/16/02	Chasan & Walton LLC P.O. Box 1069 Boise, ID 83701	\$ 250.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5/15/02	Human Supports of ID Inc. 4696 Overland Road 414 Boise, ID 83705	\$ 100.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
Subtotal of Columns A, B & C		\$ 1850.00	\$	\$
Total This Page (add columns A, B & C)				\$ 1850.00

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

313

Name of Candidate or Committee  
William T. "Bill" Sali

Contributor	Full Name, Mailing Address and Zip Code of Contributor/Leader	Column A Cash or Check	Column B In-Kind (non-monetary)	Column C Loans
5/15/02 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Vern. F. Herzog, Jr. & Associates P.O. Box 1412 Pocatello, ID 83204	\$ 100.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
5/14/02 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Beehive Homes of North Id, Inc. 710 N. 21st Street #2 Coeur d'Alene, ID 83814	\$ 250.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
5/14/02 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Progressive Action Coalition 2916 Echo Hills Dr. Lewiston, ID 83501	\$ 100.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
Subtotal of Columns A, B & C		\$ 450.00	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ 450.00

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

Page 115

Name of Candidate or Committee  
William T. "Bill" Sali

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
5/15/02	The Printing Press 1868 E. Commercial Meridian, ID 83642	\$ 596.40	\$
Purpose of Above Expenditure: <u>Printing palm cards</u>			
5/15/02	Office Value 3055 E. Fairview Meridian, ID 83642	\$ 179.49	\$
Purpose of Above Expenditure: <u>Office Supplies</u>			
5/15/02	Home Depot 1100 So. Progress Meridian, ID 83642	\$ 86.69	\$
Purpose of Above Expenditure: <u>Sign Supplies</u>			
5/16/02	Post Master Post office Meridian Meridian ID 83642	\$ 188.40	\$
Purpose of Above Expenditure: <u>Postage</u>			
5/16/02	Kinko's 271 N. Millwaukee Boise, ID 83704	\$ 68.25	\$
Purpose of Above Expenditure: <u>Printing</u>			
5/17/02	Cash & Carry 1700 Shoreline Dr Boise ID 83702	\$ 72.78	\$
Purpose of Above Expenditure: <u>Suckers</u>			
5/17/02	Subway 1890 E. Fairview Meridian, ID 83642	\$ 28.92	\$
Purpose of Above Expenditure: <u>Food for workers</u>			
5/18/02	Pauls 700 E Avalon Kuna, ID 83634	\$ 68.00	\$
Purpose of Above Expenditure: <u>Stamps</u>			
5/18/02	Dominos Pizza 1701 W. Cherrylane Meridian ID 83642	\$ 35.00	\$
Purpose of Above Expenditure: <u>Food for workers</u>			
Subtotals of Columns A & B		\$ 1,323.93	\$
Total This Page (add columns A & B)		\$ 1,323.93	\$

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

Page 215 of

Name of Candidate or Committee  
William T. "Bill" Sali

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
5/18/02	"Kinko's 271 N. Milwaukee Boise ID 83704	\$ 566.48	\$
Purpose of Above Expenditure: <u>Printing</u>			
5/19/02	"Office Depot 8033 W. Franklin Boise, ID 83704	\$ 46.67	\$
Purpose of Above Expenditure: <u>Office Supplies</u>			
5/19/02	"Wal mart 4051 E. Fairview Ave Meridian, Id. 83634	\$ 79.55	\$
Purpose of Above Expenditure: <u>ink for printer</u>			
5/19/02	"USPS Meridian Post office Meridian, ID 83642	\$ 718.00	\$
Purpose of Above Expenditure: <u>Postage</u>			
5/20/02	"U.S. P.S. Meridian, ID 83642	\$ 89.60	\$
Purpose of Above Expenditure: <u>Postage</u>			
5/20/02	"Pauls. 700 E. Avalon Kuna, ID 83634	\$ 68.50	\$
Purpose of Above Expenditure: <u>Postage</u>			
5/20/02	"Chuck O Rama 7901 Overland Rd. Boise, ID 83709	\$ 33.62	\$
Purpose of Above Expenditure: <u>food for workers</u>			
5/21/02	"Pit Stop 738 E. Avalon Kuna, ID 83634	\$ 27.28	\$
Purpose of Above Expenditure: <u>food for workers</u>			
5/21/02	"U.S.P.S. Meridian ID 83642	\$ 248.30	\$
Purpose of Above Expenditure: <u>Postage</u>			
Subtotals of Columns A & B		\$ 1,878.00	\$
Total This Page (add columns A & B)			\$ 1,878.00

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

Page **315**

Name of Candidate or Committee <b>William T. "Bill" Sali</b>			
Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
<b>5/21/02</b>	<sup>1</sup> Jennifer Beck 324 8th Ave S. Nampa, ID 83651	\$ 31.06	\$ _____
Purpose of Above Expenditure: <b>Reimbursement/dinner for workers</b>			
<b>5/22/02</b>	<sup>2</sup> U.S.P.S Meridian, ID 83642	\$ 102.00	\$ _____
Purpose of Above Expenditure: <b>Postage</b>			
<b>2/22/02</b>	<sup>3</sup> U.S.P.S. Meridian ID 83642	\$ 478.95	\$ _____
Purpose of Above Expenditure: <b>Postage</b>			
<b>5/23/02</b>	<sup>4</sup> Com Pass 800 S. Industry Way Meridian, ID 83642	\$ 152.25	\$ _____
Purpose of Above Expenditure: <b>maps</b>			
<b>5/24/02</b>	<sup>5</sup> Idaho Chooses Life P.O. Box 8172 Boise, ID 83707	\$ 335.00	\$ _____
Purpose of Above Expenditure: <b>donation</b>			
<b>5/25/02</b>	<sup>6</sup> Pauls 700 E Avalon Kuna ID 83634	\$ 33.05	\$ _____
Purpose of Above Expenditure: <b>dinner for workers.</b>			
<b>5/28/02</b>	<sup>7</sup> Heather Peoples P.O. Box 242 Kuna, ID 83634	\$ 275.00	\$ _____
Purpose of Above Expenditure: <b>literature drop</b>			
<b>5/28/02</b>	<sup>8</sup> Anna Sali 175 Linke Ct Kuna ID 83634	\$ 275.00	\$ _____
Purpose of Above Expenditure: <b>literature drop</b>			
<b>5/28/02</b>	<sup>9</sup> Micah Sali 175 Linke Ct. Kuna ID 83634	\$ 225.00	\$ _____
Purpose of Above Expenditure: <b>literature drop</b>			
Subtotals of Columns A & B		\$ 1907.31	\$ _____
Total This Page (add columns A & B)			\$ 1907.31



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

Page **4** of **5**

Name of Candidate or Committee  
**William T. "Bill" Sali**

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
5/28/02	1. Danielle Peoples P.O. Box 242 Kuna, ID 83634	\$ 125.00	\$ _____
Purpose of Above Expenditure: literature drop			
5/28/02	2. Shawn Thacker P.O. Box 242 Kuna, ID 83634	\$ 50.00	\$ _____
Purpose of Above Expenditure: literature drop			
5/28/02	3. Jamic Peoples P.O. Box 242 Kuna, ID 83634	\$ 50.00	\$ _____
Purpose of Above Expenditure: literature drop			
5/28/02	4. Rachel Sali 175 Linke Ct Kuna, ID 83634	\$ 110.00	\$ _____
Purpose of Above Expenditure: literature drop			
5/28/02	5. Christina Sali 175 Linke Ct Kuna, ID 83634	\$ 85.00	\$ _____
Purpose of Above Expenditure: literature drop			
5/28/02	6. Lisa Honey 601 N. Linder Kuna, ID 83634	\$ 85.00	\$ _____
Purpose of Above Expenditure: literature drop			
5/27/02	7. Home Depot 1100 S. Progress Av Meridian, ID 83642	\$ 26.92	\$ _____
Purpose of Above Expenditure: Staple gun/staples			
6/03/02	8. Golden Coral 8460 W Emerald Boise, ID 83704	\$ 34.89	\$ _____
Purpose of Above Expenditure: food for workers			
6/7/02	9. Nick Gardner 1215 1st St S Nampa, ID 83651	\$ 25.00	\$ _____
Purpose of Above Expenditure: Sign-Pick-up			
Subtotals of Columns A & B		\$ 591.81	\$ _____
Total This Page (add columns A & B)		\$ 591.81	\$ _____

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

Page 5 of 5

Name of Candidate or Committee  
William T. "Bill" Sali

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<u>5/31/02</u>	<u>Jacksons 330 W 3 KUNA, IN 83634</u>	<u>\$ 40.00</u>	\$ _____
Purpose of Above Expenditure: <u>Sign/Pick-up</u>			
<u>5/29/02</u>	<u>Terry Sali 175 Linke Ct. Kuna ID 83634</u>	<u>\$ 162.17</u>	\$ _____
Purpose of Above Expenditure: <u>Reimbursement/victory party</u>			
<u>   /   /</u>	<u>3.</u>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>   /   /</u>	<u>4.</u>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>   /   /</u>	<u>5.</u>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>   /   /</u>	<u>6.</u>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>   /   /</u>	<u>7.</u>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>   /   /</u>	<u>8.</u>	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>   /   /</u>	<u>9.</u>	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		<u>\$ 202.17</u>	\$ _____
Total This Page (add columns A & B)			<u>\$ 202.17</u>

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

Name of Candidate or Committee <b>William T. "Bill" Sali</b>	Report Covering the Period From <b>05/13/02</b> to <b>06/07/02</b>
---	---

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.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period: Total Number _____ Total Amount \$ _____
--

**Incurred Expenditures of \$25.00 or More This Period:**

Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	Amount Incurred
5/20/02	1. Modern Printers 714 E 1st Street Meridian, ID 83642	956.55
Purpose of Above Expenditure: <b>Printing</b>		
	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:		

Line 2: Total Amount of Incurred Expenditures \$25.00 or more	\$ <u>956.55</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>956.55</u>