



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

Section I

Name of Candidate or Political Committee and Chairperson JAN BROWN		Office Sought (if candidate) STATE REPRESENTATIVE	District (if any) PRD: B
Mailing Address <input type="checkbox"/> Check if address change. 3105 STONERIDGE CIRCE	City and Zip AMMON, 83406	Home Phone 542-1656	Work Phone 526-4342
Name of Political Treasurer DIANA L. LOWREY		STATE OF IDAHO	
Mailing Address <input type="checkbox"/> Check if address change. 169 6TH STREET	City and Zip IDAHO FALLS 83401	Home Phone 523-8742	Work Phone 526-0935

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 5/13/2002 through 6/7/2002

- | | | |
|--|---|--|
| <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	\$ 0.00
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 2,307. ⁰⁰	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 1150. ²⁹	\$ 3,458. ¹³
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 3,458. ¹³	\$ 3,458. ¹³
Line 5: Total Expenditures (Enter amount from page 2)	\$ 1672. ⁰⁰	\$ 1672. ⁰⁰
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 1786. ¹³	\$ 1786. ¹³

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

Diana L. Lowrey
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee <div style="font-size: 1.2em; font-family: cursive;">JAN BROWN</div>	Report Covering the Period From <u>5/13/02</u> to <u>6/7/02</u>
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UNITEMIZED CONTRIBUTIONS

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

Total Number 2 Total Amount \$ 50⁰⁰

UNITEMIZED EXPENDITURES

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

Total Number 1 Total Amount \$ 24⁰⁰

	Total This Period
____ Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>50⁰⁰</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>1100²⁹</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>1150²⁹</u>
____ Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>24⁰⁰</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>1647⁸⁹</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>1672⁰⁰</u>

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

Name of Candidate or Committee
JAN BROWN

		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>5/18/02</u>	1. JACK & RUTH BROWN 1840 S. PACIFIC STREET OCEANSIDE, CALIFORNIA 92054	\$ <u>500⁰⁰</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>500⁰⁰</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/20/02</u>	2. Phillip & Wynn Wright 3559 STONEGATE AMMON, IDAHO 83406	\$ <u>250⁰⁰</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>250⁰⁰</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/13/02</u>	3. Karen Lansing 437 6th STREET IDAHO FALLS, ID 83401 (FOR MAPS/ CT. ELECT. OFFICE)	\$ _____	\$ <u>71⁴⁰</u>	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ <u>71⁴⁰</u> Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/31/02</u>	4. WENDY JACQUET P.O. BOX 783 KETCHUM, IDAHO 83340	\$ <u>100⁰⁰</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100⁰⁰</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>6/2/02</u>	5. Post Register 333 Northgate Mile P.O. BOX 1800 IF ID 83401 (rebate - bad ad)	\$ <u>145⁴⁴</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>145⁴⁴</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/13/02</u>	6. Karen Lansing 437 6th St. IDAHO FALLS, ID 83401 OFFICE SUPPLIES FROM OFFICE MAX - IF ID.	\$ _____	\$ <u>33⁴⁵</u>	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ <u>104⁸⁵</u> 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>995⁴⁴</u>	\$ <u>104⁸⁵</u>	\$ _____
Total This Page (add columns A, B & C)				\$ <u>1100²⁹</u>

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

Name of Candidate or Committee
JAN BROWN

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
5,13,02	1. Modern Printing 691 N.W. Main Blairfoot, IDAHO 83221	\$ 162 ⁷⁵	\$
Purpose of Above Expenditure: CAMPAIGN CARDS (#1,500)			
5,13,02	2. Karen Lansing / MAPS FROM CT. OFFICE 437 6th ST. IDAHO FALLS, ID 83401	\$	\$ 71 ⁴⁰
Purpose of Above Expenditure: MAPS FROM COUNTY ELECTIONS OFFICE, IF ID 83402 605 N. CAPITAL AVE IF ID 83402			
5,13,02	3. Karen Lansing 437 6th ST. IDAHO FALLS, ID 83401	\$ 71 ⁴⁰	\$
Purpose of Above Expenditure: REIMBURSEMENT FOR MAPS (new precinct maps)			
5,13,02	4. Karen Lansing - OFFICE MAX #666 437 6th ST IDAHO FALLS, ID. 83401	\$	\$ 33 ⁴⁵
Purpose of Above Expenditure: purchase of office supplies from #666 office max, country club mall 1425 Northgate mile IF ID 83401			
5,13,02	5. Karen Lansing - 437 6th ST IDAHO FALLS, ID 83401	\$ 33 ⁴⁵	\$
Purpose of Above Expenditure: REIMBURSEMENT FOR OFFICE SUPPLIES FROM OFFICE MAX, IDAHO FALLS, ID. 83401			
5,13,02	6. KAREN LANSING 437 6th ST. IDAHO FALLS, ID 83401	\$ 1,000 ⁰⁰	\$
Purpose of Above Expenditure: PAY FOR CAMPAIGN manager from may 6th THROUGH may 19th (2 weeks @ 500/wk)			
5,23,02	7. Post Register 333 Northgate Mile P.O. Box 7800 IDAHO FALLS, IDAHO	\$ 145 ⁴⁴	\$
Purpose of Above Expenditure: campaign ad for Sunday paper			
5,31,02	8. Cassia County Democrats Burley, IDAHO 83318	\$ 130 ⁰⁰	\$
Purpose of Above Expenditure: Democratic Convention Registration			
____	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 1543 ⁰⁴	\$ 104 ⁸⁵
Total This Page (add columns A & B)			\$ 1647 ⁸⁹