C-2 Rev. 7/97



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

Section	1

December 1					
Name of Candidate or Political Co.				Sought (if candidate)	District (if any)
Jonathan Ha				te Redieset	32-B
Mailing Address	Check if address change.		401 Home		Work Phone
P.O. Box 211		Idaho Falls	10 6	23-9583	523-9583
Name of Political Transurer		·			
Nancy Robert Mailing Address	Check if address change	City and Zip	Home Home	Ohone	Work Phone
2360 Santale	_	The Sale		23-4349	WOLK PHONE
	202	Jaano Fall	9, 101 0	CV 4077	
Section II		TYPE OF REPOR			
Directions: To indicate the			dates and check	the appropriate bo	ox(es). See the
instructional manual for repo	orting periods and due of t is for the period from	dates.	2 through	5 / 12 /	2001
inis repor	t is for the bestor from	1 1 1 1	anongn	<u> </u>	F
7 Day Pre-Primar	y Report E	l 7 Day Pre-General Rep	ort 🛮 Qua	rterly (April 30)	S 2
= ** * * * * * * * * * * * * * * * * *				filed by ballot meas	sure committees)
☐ 30 Day Post-Prim	ary Report L	l 30 Day Post-General R		manufac (Tech. 20)	<u> </u>
October 10 Pre-G	eneral Report	l Annual Report		irterly (July 30) filed by ballot meas	, -
	enoral Napoli	ridiosi topor	(0)		
Is this Report ar	amendment?	s S No	s this a Termin	ation Report?	Yes BNo
Section III	STATEMENT OF	NO CONTRIBUTION	IS OR EXPEN	DITURES	
Th. 17 TA 1 - 1 - 1 - 1 - 1 - 1	44				
Directions: If you had no co the appropriate dates and sig					
Section IV.	ekan Thansa wasalasa diwa	a a noulburglana and bassa are			
U I nereby certify	that I have received no	contributions and have n	nade no expend /	itures during this n	eporting period
	HOM	unough		<u>-'</u> •	
Section IV		SUMMARY			
To reach your Calendar Yea			COLUM	· -	COLUMN II
figures to the Column II figures	ires of your previous re	port (except on line 6).	This Per	riod Calei	idar Year to Date
Line I: Cash on Hand Janua	rv 1. This Vear*		\$ XXXXX	cx \$	
Line 2: Enter Cash Balance	•	ing Period**	2	<u> </u>	xxxxxx
Line 3: Total Contributions		-	\$	<u> </u>	
Line 4: Subtotal (Add lines	•	50 <i>1)</i>			· · · · · · · · · · · · · · · · · · ·
Line 5: Total Expenditures (•	re 2\	\$ 7/3	24 5	1124
Line 6: Cash Balance at Clo		•	\$	<u> </u>	
	-0 01 1 01 104 (D404 100 1				
*This same figure should be					
**You must report the cash					
Note that the closing cash b	alance for the current r	eporting period appears of	on the next repo	rt as beginning cas	h on hand.
Section V	CONTRIBUTION	NS PLEDGED - INCUP	RED EXPEN	DITURES	
Contributions Pledged d	uring this reporting per	iod but not yet received:	□None !	⊐\$(s	ce attached Schedule C-2A)
_		•			•
Incurred Expenditures of	iuring this reporting per	nod but not yet paid:	□None I	(s	ee attached Schedule C-2B)
	Section VI	CAD	TIFICATION	·	
Return This Report To:		∕	LIFICATION		
Pete T. Cenarrusa	I Na	ncu Kobertsi	W	, hereby certify	that the information
Secretary of State		ort is a true, complete and	correct Carers		
PO Box 83720	•		a control campa	right anteriores to 120	rosure report as
Boise ID 83720-0080	required b		1.		
fax: (208) 334-2282			Kobert	son	
		Signatu le	of Palitical Tre	cosurer	

DETAILED SUMMARY PAGE

Name of Candidate or Committee Jonathan Haines	Report Covering the Period From 1 / 1 / 2007/0 5 / (2 / 2002
	ÉMIZED CONTRIBUTIONS s of Fifty Dollars (\$50.00) or Less This Period
Total Number _	Total Amount \$
	TEMIZED EXPENDITURES ass Than Twenty-Five Dollars (\$25.00) This Period
Total Number_	Total Amount \$

	Total This Period
Number of Schedule A pages Attached	0
Contributions	
Unitemized Contributions (\$50 and less) from top of page	s
Itemized Contributions (total all Schedule A sheets)	s
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$
Number of Schedule B pages Attached	
Expenditures	
Uniternized Expenditures (less than \$25) from top of page	s
Itemized Expenditures (total all Schedule B sheets)	\$ 71,24
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	S

MAY 21 '02 17:16 5292742

SCHEDULE B ITEMIZED EXPENDITURES

3 3

of Twenty-Five Dollars (\$25.00) or more this period

ame of Candidat			
Jonas	than Haines	Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
3,28,02	Secretary of State 700 W. Jofferson / P.O. Box 93720 Boise, 10 83720 - 0080	s_ 30.00	\$
urpose of Abov	e Expenditure:		
5,07,02	Inkley's Photography 396 Park Avenue Totaho Falls 10 83402	s_41.24	s
	e Expenditure:		
1. /		s	s
	/e Expanditure:		
	4.		
١ ا		s	\$
	ve Expenditure; 5,		
		\$	s
urpose of Abe	ve Expenditure:		
	6.	s	s
!!		3	
Purpose of Abo	ve Expenditure:		<u> </u>
	7.		
11		<u>s</u>	\$
Purpose of Abo	ve Expenditure:		
	8 .		
		\$	\$
Purpose of Abo	ve Expenditure:		
	9.		
, ,		s	S
Purpose of Abo	ove Expenditure:		
	Subtotals of Columns A & B	s 71.24	\$
	Total This Page (add columns A & B)		5 71.24