

CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Santiar I		(Please Print or T	ype)				
Section I Name of Candidate or Political Cor	nmittee and Chairnerson			Office Sought (if	candidate)	District (if any)	
Bob Sonnichsen	minimo una cuampano			State Co	*	AH 10: 32	
Mailing Address	☐ Check if address change.	City and Zip		Home Phone	1777 147	Work Phone	
10309 Shadybroo	ok Drive	Boise 8	33704	(208) 32	2-4106	<u>/ (208)383€</u> FIDAHO	7017
Cynthia A. Pole	neke			-	STATE U	FIDATIO	
Mailing Address	☐ Check if address change.	City and Zip		Home Phone		Work Phone	
4005 N. Claytor	Pl.	Boise 8	33704	(208) 3	76–6630	(208) 37	6-6630
Section II		TYPE OF REPO	ORT				
Directions: To indicate the t instructional manual for report This report		fill in the appropria es.	te dates an				
■ 7 Day Pre-Primary	Report	Day Pre-General R	eport	☐ Quarterly (A		ure committees)
☐ 30 Day Post-Prima	ary Report	0 Day Post-General	Report	☐ Quarterly (J			•
☐ October 10 Pre-Ge	eneral Report	Annual Report		(only filed by t		ure committees)
Is this Report an	amendment?	□ No	Is this a	Termination Re	port? 🗆	Yes □ No	
Section III	STATEMENT OF N	O CONTRIBUTIO	ONS OR E	EXPENDITUR	ES		
Directions: If you had no co the appropriate dates and sig Section IV. I hereby certify	ontributions or expenditure on this report. Be sure to contact I have received no confrom/	carry forward the ap	propriate ' e made no	'Calendar Year 1	to Date" fig	gures in Columi	n II,
Section IV		SUMMARY	,				
To reach your Calendar Yea figures to the Column II figu		report's Column I		COLUMN I This Period		COLUMN II Idar Year to D	ate
Line 1: Cash on Hand Janua Line 2: Enter Cash Balance a Line 3: Total Contributions of Line 4: Subtotal (Add lines I Line 5: Total Expenditures (Line 6: Cash Balance at Clos	at Close of Last Reporting (Enter amount from page 1, 2 and 3) Enter amount from page 2	2)	\$ 7, \$ 4 \$ 5	XXXXXX ,520.38_ ,175.00 5695.38_ ,1905.37_ 1790.01	\$ \$ _ \$ _ \$ _ \$ _	2,500.00 XXXXXX .4,175.00 6,675.00 1,905.37 4,769.63	
*This same figure should be **You must report the cash Note that the closing cash b	on hand at both the begin	ning of the reporting	g period an	id the close of the	he reporting	g period. h on hand.	
Section V	CONTRIBUTIONS	PLEDGED - INC	URRED E	XPENDITURI	ES		
Contributions Pledged d	uring this reporting period	d but not yet receive	ed: XIXNo	one 🗆 🖳	(se	e attached Sched	ule C-2A
Incurred Expenditures d	luring this reporting perio	d but not yet paid:	□No	one 👭 <u>3,</u> 3	189 <u>.53</u> (s	ee attached Sched	lule C-2B
	Section VI		ERTIFICA	ATION			
Return This Report To: Pete T. Cenarrusa Secretary of State PO Box 83720 Boise ID 83720-0080 fax: (208) 334-2282	I Cynt	hia A. Polens (name of Political Treasu is a true, complete a	ske irer) and correct A.	, her t Campaign Fina	-	that the inform losure Report a	
1		jj Signati	ure oj Polil	tical Treasurer			

DETAILED SUMMARY PAGE

Name of Candidate or Committee

Bob Sonnichsen for State Controller

Report Covering the Period
From 01 / 01 / 02 to 05 / 12 / 02

UNITE Contributions	MIZED of Fifty Dol	CONTRIBUT	FIONS ess This Period	
Total Number	11_	Total Amount \$	295.00	
UNIT Expenditures of Les		D EXPENDIT enty-Five Dollars (A CONTRACTOR OF THE SECOND
Total Number	13	Total Amount \$	95.75	

	Total This Period
1 Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 295.00
Itemized Contributions (total all Schedule A sheets)	\$ _4,175.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 4,470.00
2 Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 95.75
Itemized Expenditures (total all Schedule B sheets)	\$ 1,809.62
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 1,905.37

SCHEDULE A ITEMIZED CONTRIBUTIONS

Page	of
1	1

of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee

Bob Sonnichsen for State Controller

BOD BOIII	nichsen for State Controller	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
3 / 15/ 02 XXPrimary ☐ General	Bob Sonnichsen 101 S. Capitol Blvd. #905 Boise, ID 83702	SCalendar Year To Date	SCalendar Year To Date	\$ 2,500.00 \$ 2,500.00 Calendar Year to Date
4 / 5 / 02 XPrimary General	Tommy H. Barnes 5722 Highway 93 Jerome, ID 83338	\$ 500.00 \$ 500.00 Calendar Year To Date	\$	\$Calendar Year to Date
04/16/ 02 XX Primary □ General	1425 Borah Avenue Moscow, ID 83843	\$ 75.00 \$ 75.00 Calendar Year To Date	S	SCalendar Year to Date
	Oliver Russell & Assoc. Inc. 202 N., 9th Street Boise, ID 83702	\$	\$ 1,000.00 \$ 1,000.00 Calendar Year To Date	S
4// 5 / 02 ★Primary ☐ General	Merle Stoddard 3168 W. 3500 Twin Falls, ID 83301	SCalendar Year To Date	\$ 100.00 S 100.00 Calendar Year To Date	S Calendar Year to Date
// □ Primary □ General	6.	SCalendar Year To Date	\$Calendar Year To Date	S
Primary ☐ General	7.	\$ SCalendar Year To Date	\$Calendar Year To Date	SCalendar Year to Date
// □ Primary □ General	8.	\$Calendar Year To Date	\$Calendar Year To Date	\$
☐ Primary ☐ General	9.	\$Calendar Year To Date	\$ Calendar Year To Date	\$
☐ Primary☐ General	10.	\$Calendar Year To Date	\$	\$Calendar Year to Date
Subtotals of Columns A. B & C \$ 575.00 \$ 1,100.00 \$				
	Total This Page (add columns A, B & C)			s 4,175.00

SCHEDULE B ITEMIZED EXPENDITURES

Page

\$ 1,291.52

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

Name of Candida			
Bob Soi	nnichsen for State Controller	Column A	Column B
Date	Full Name. Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
3, 21, 02	L & L Shirts 5620 Fairview Avenue Boise, ID 83706	s129.28	\$
Purpose of Abov	e Expenditure: Campaign T-Shirts & Logo Printing	<u>.</u>	
3/ 21 02	Signs Now 8033 Fairview Avenue Boise, ID 83704	\$219.09	s
	e Expenditure: Signs & Banners		I
3, 25,02	Idaho Secretary of State 700 W. Jefferson Boise, ID 83720	\$	s
Purpose of Abov	e Expenditure: Filing Fee		· · · · · · · · · · · · · · · · · · ·
3, 25, 02	Rapid Printing 203 Ellen Street Boise, ID 83714	\$288.75	s
Purpose of Abov	ve Expenditure: Bumper Stickers & Various Stickers		
3, 26, 02	Wells Fargo Bank P.O. Box 56995 Portland, OR 97228	s <u>97.78</u>	s
Purpose of Abov	e Expenditure: Check Printing Charges		
3/ 30/02	Mountain States Cellular Inc. 9986 W. Emerald Boise, ID 83705	s <u>136.50</u>	s
Purpose of Abov	e Expenditure: Cellular Phone Set-up		
3, 30, 02	Initial Response Embroidery 223 N. 8th Boise, ID 83702	\$ <u>84.00</u>	\$
Purpose of Abov		Shirts	
4/2/02	Kinkos 271 N. Milwaukee Street Boise, ID 83704	s36.12	s
Purpose of Abov			
	9 Chase VISA P.O. Box 52126 Phoenix, AZ 85072-2126	s100.00	s
Purpose of Abov	ve Expenditure: Campaign expense		
	Subtotals of Columns A & B	s1,291.52	\$
			,

Total This Page (add columns A & B)

SCHEDULE B ITEMIZED EXPENDITURES

Page of

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

Name of Candidate or Committee Bob Sonnichsen for State Controller Column B Column A In-Kind Cash or Full Name, Mailing Address and Zip Code Check (non-monetary) of Recipient Date Kinkos a (AcM) 271 N. Milwaukee 32.97 4,2 02 Boise, ID 83704 Printing Purpose of Above Expenditure: Verizon Wireless 80.10 P.O. Box 96081 4 30 02 98009-9681 Bellevue, WA Telephone Purpose of Above Expenditure: Lauren McLean 405.03 1618 N. 18th Street 5, 9 02 Boise, ID 83702 Reimbursement for Printing Costs/Postage Purpose of Above Expenditure: 518.10 \$ Subtotals of Columns A & B \$ 518.10 Total This Page (add columns A & B)

SCHEDULE C-2B EXPENDITURES INCURRED BUT NOT YET PAID

E. Co. III. Coming	Report Covering the Period From 1 / 1 / 02 to 5 / 12 / 02

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.

Total Amount \$ 191.50 Total Number 14 Line 1: Incurred Expenditures of Less Than \$25.00 This Period:

Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	- Amount Incurred
3,16 , 02	Bob Sonnichsen 101 S. Capitol Blvd., #905 Boise, ID 83702-5958	\$2,500.00
urpose of Above E	xpenditure: Loan to Campaign to Open Checking Accour	nt
3 / 29/02	SSouthwest Airlines P.O. Box 36649 Dallas, TX 75235-1649	120.50
Purpose of Above I	expenditure: Trip to Couerad'Alene	
4 12 02 3.	Casa De Oro 5th & Main Moscow, ID	42.50
Purpose of Above l	Expenditure: Campaign Workers Meals	
4 , 14, 02	National Car Rental Spokane International Airport	104.79
Purpose of Above	Spokane, WA Expenditure: Car Rental - Trip to Couer d'Alene	
4 / 16/ 02	Kinkos 271 N. Milwaukee Boise, ID 83704	36.75
Purpose of Above		
5 ,5 ,02	Kinkos 271 N. Milwaukee Boise, ID 83704	52.50
Purpose of Above	Expenditure: Printing	
5 5 02	Chase Platinum VISA P.O. Box 52126 Phoenix, AZ 85072-2126	34.07
Purpose of Above		
5 , 9 ,02	Chicago Connection 7070 Fairview Avenue Boise, ID 83704	27.19
Purpose of Above	Expenditure: Campaign workers meals	
Line 2: Total Am	ount of Incurred Expenditures \$25.00 or more	\$ <u>See Pg 2)</u> \$
Line 3. Total Am	ount of Incurred Expenditures Under \$25.00 (enter amount from line 1) ount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Se	·

SCHEDULE C-2B EXPENDITURES INCURRED BUT NOT YET PAID

Name of Candid	ate or Committee	Report Covering the Period From 1 / 1 / 02 to 5	/ 12 /02
	nichsen for State Controller uplete this schedule if you incurred an obligation during this rep	porting period to purchase an item or service, but did	not make
payment before t	he end of the reporting period. Do not include these entries on	Schedule B diffit you destand in the payment	
Line 1: Incurr	ed Expenditures of Less Than \$25.00 This Period: Total	Number N/A Total Amount \$]	N/A_
Incurred Expe	nditures of \$25.00 or More This Period:		
Date	Full Name, Mailing Address and Zip Cod of Recipient	1E	Amount Incurred
Incurred	1.		70.73
5,9 92	Kinkos 271 N. Milwaukee		79.73
	Boise, ID 83704		
Purpose of Abo	ove Expenditure: Printing 2.		
	2.		
			<u> </u>
Purpose of Abo	ove Expenditure:		
	3.		
, ,			
Durnosa of Ah	ove Expenditure:		
rurpose of AD	4.		
Purpose of Ab	ove Expenditure:		
	3.		
Purpose of Ab	ove Expenditure:		
	6.		
/ /			
Dumpose of Ab	ove Expenditure:		
rurpose of Au	7.		
Purpose of Ab	pove Expenditure:		
	о. 		
//			
Purpose of Al	pove Expenditure:		
Line 2: Total	Amount of Incurred Expenditures \$25.00 or more Page	s 1 & 2	2,998.03
Line 3. Tota	Amount of Incurred Expenditures Under \$25.00 (enter amoun	t from line I) \$	191.50
1.1 (T.40	LAmount of Incurred Expenditures this Period (add lines 2 and	3) Also enter this total in Section V. page 1. \$	3,189.53