C-2 Rev. 7/97



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

POSTED

Section I			\		7.			
Name of Candidate or Political Co	mmittee and Chairperson	n				Office Sought		District (if any)
Joe D. Harton Mailing Address	☐ Check if address cha		l At 4 = 7	_		District	Trage.	Fourth Judicle 1 nist.
Po Cox 1612	Cuest it admens can	arfaer	City and Zi	•	11-14-	Home Phone	8842	Wark Phone (201) 287-7544
Name of Political Treasurer			1 30130 1	7 10 10	1 1413	[[800,124		2
Joel D. Horton		_				JEOKE 1		ATAGE
Mailing Address	☐ Check if address ob	ange.	City and Zi	•		Home Phone		Work Phone
PI BOX 1615			Roise, 19	15341	11675	(508) 362	9933	(208) 287-4547
Section II			TYPE O					
Directions: To indicate the	type of report being	filed,	fill in the ap	ppropriat	e dates ar	nd check the ap	ppropriate b	ox(es). See the
instructional manual for report	orung periods and d it is for the period fr			/ 0	د thre	ough 5	/ 12 /	02
	-		, .		wii c	/ugn	<u>, ,</u>	
7 Day Pre-Primar	y Report	7	7 Day Pre-General Report			□ Quarterly (April 30)		
☐ 30 Day Post-Prim	ery Report	□ 3 <i>0</i>	Day Post-	.General	Renort	(only filed by ballot measure committees)		
2 30 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	my respon		Day 1 ost	Ceneral	report	☐ Quarterly	(July 30)	
☐ October 10 Pre-G	eneral Report		innual Report			(only filed by ballot measure committees)		
Is this Report a	n amendment?	Yes	N o		Is this a	Termination F	Report?	Yes ⊠No
Section III	STATEMENT	OF N	O CONTR	IBIITIC	NS OR I	FYPENDITI	PFC	
Directions: If you had no co	ontributions or exper	nditure	s during th	is reporti	ng period	I, check the bo	x next to the	statement below, fill in
the appropriate dates and sign Section IV.	gn uns report. Be su	re to c	arry torwar	a me api	propriate	"Calendar Yea	ir to Date" i	gures in Column II,
	that I have received	no cor				expenditures	during this i	eporting period
	from/			through		/	•	<u>-</u>
Section IV			SUN	IMARY			•	
To reach your Calendar Yea						COLUMN I		COLUMN II
figures to the Column II flg	ares of your previou	в герог	t (except o	n line 6).	1	This Period	Cale	ndar Year to Date
Line I: Cash on Hand Janua	rv 1. This Year*				\$	xxxxxx	S	0
Line 2: Enter Cash Balance	• •	orting	Period**		\$	0	- s	xxxxxx
Line 3: Total Contributions					s _	150.00	s _	150.00
Line 4: Subtotal (Add lines 1, 2 and 3)			s <u> </u>	150.00	\$_	150.00		
Line 5: Total Expenditures (Enter amount from page 2)			s _	180.00	. \$_	150.00		
Line 6: Cash Balance at Clo	se of Period (Subtra	ct line	5 from line	4)**	s _	0	. s _	<u> </u>
*This same figure should be	entered on line 1 of	fall rer	orts filed t	his calen	dar vear.			
**You must report the cash	on hand at both the	beginn	ing of the r	reporting	period ar	nd the close of	the reportin	g period.
Note that the closing cash b	alance for the curren	nt repo	rting period	d appears	on the n	ext report as b	eginning car	sh on hand.
Section V	CONTRIBUT	IONS	PLEDGE	- INCL	RRED E	XPENDITUI	RES	
Contributions Pledged d	wring this reporting	period	but not yet	received	l; 🗷 No	one □\$	(s	ce attached Schedule C-2A
Incurred Expenditures	luring this reporting	period	but not ye	t paid:	Man	one 🗆\$	(\$	ee attached Schedule C-2B
	_	_	-	-		_		•
	Section VI			CE	RTIFICA	ATION		<u> </u>
Return This Report To:	. т	001	استام الأ	٠				
Pete T. Connrrusa Secretary of State	(mane of Paliboli Tressurer)							
PO Box 83720 in this report is a true, complete and correct Campaign Financial Disclosure Report as				losure Report as				
Boise ID 83720-0080 required by law.								
fax: (208) 334-2282								
	l			Signatu	e of Polit	tical Treasures		

DETAILED SUMMARY PAGE

Joel D. Horton	Report Covering the Period From 1 / 1 / 92 to 5 / 12 / 92
	ZED CONTRIBUTIONS (fty Dollars (\$50.00) or Less This Period
Total Number0	Total Amount SO
	NZED EXPENDITURES an Twenty-Five Dollars (\$25.00) This Period
Total Number <u>O</u>	Total Amount S O

	Total This Period
Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	s o
Itemized Contributions (total all Schedule A sheets)	\$ 150
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 150
Number of Schedule B pages Attached	- -
Expenditures	
Uniternized Expenditures (less than \$25) from top of page	s o
Itemized Expenditures (total all Schedule B sheets)	2 150
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	S 150

SCHEDULE A ITEMIZED CONTRIBUTIONS

Риде	of
ı	l

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

Name of Candida	ne or Committee D- Horton			·
<u> </u>	tier test	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
3/27/02	1 10 40 2 10 10	s 150-00	s	\$
☐ Primary ☐ General	goise in 83 701 - 1617	S [50 - 00 Calendar Year To Date	SCalendar Year To Date	S Calendar Year to Date
	2.	\$	\$	s
☐ Primary ☐ General		\$Calendar Year To Date	SCulendar Year To Danc	S Calondar Year to Date
	3.	s	s	s
☐ Primary ☐ General		Colendar Year To Date	SCalendar Year To Date	SCalendar Year to Ditte
	4.	<u>s</u>	s	s
☐ Primary ☐ General	5.	SCalendar Year To Date	SCalandar Your To Date	SCalendar Yow to Date
		s	s	s
☐ Primary ☐ General	6.	S Culendar Year To Date	SCalendar Year To Date	Calendar Your to Date
☐ Primary		s	s	5
General	7.	Calendar Year To Dasa	S Calendar Year To Done	Calendar Year to Dure
☐ Primary	•	s	\$	s
☐ General	B.	SColondar Year I'n Dage	SCalendar Year To Date	S Calendar Year to Dete
Primary		<u>s</u>	\$	s
☐ General	9.	S Calendar Year To Date	Calendar Year To Date	SCniendar Your to Date
Primary		s	s	s
☐ General	10.	\$Calterdar Your To Date	S Calendar Your To Date	SCalendar Year to Dete
/		\$	s	\$
☐ Géneral	Subsection of Only and A. D. C. C.	Calendar Year To Dave	Calender Year To Date	Calendar Year so Date
	Subtotals of Columns A, B & C Total This Page (add columns A, B & C)	\$ 150.00] \$ <u>Q</u>	s_0

Name of Candidate or Committee

SCHEDULE B ITEMIZED EXPENDITURES

Page	of
1	1

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

Joel]	D. Horton		
		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
•	1. Secretary of State Room 205, Statehouse Boise, 19 83720		
3 127 102	Roise. In 83720	s_ 150	s
	ove Expenditure: Filing Fee		<u> </u>
	2.		
<u></u>	(Constant	s	s
Purpose of Abo	ove Expenditure:		<u> </u>
	3.		
		2	S
Purpose of Abo	ove Expenditure:		
	4.		
		\$	\$
Purpose of Abo	ove Expenditure:		
	5.		
, , ,		s	\$
Purpose of Abo	we Expenditure:		
	6.		
		\$	s
Purpose of Abo	ve Expenditure:		
	7.		
/_/		\$	s
Purpose of Abo	ve Expenditure:		
	8.		
		\$	s
Purpose of Abo	ve Expanditure:		
	9.		
		<u>s</u>	\$
Purpose of Abo	ve Expenditure:		
	Subtotals of Columns A & B	s 150.00	S
-	Total This Page (add columns A & B)		s 150.00