

## CAMPAIGN FINANCIAL DISCLOSURE REPORT

**SUMMARY PAGE** 

		(Please Print or Type	(Please Print or Type)	
Section I			Cotton County (if con)	12 OCT 10 PN 11 UU
Name of Candidate or Political Co	mmittee and Chairperson	•	ST DED	3 24
Mailing Address	☐ Check if address char	ige.   City and Zip	Home Phone	Worle Phone
1000 /12	1010 W.	TWIN FALLS &	3301 (208) 734-63	SED SAME
Name of Political Treasurer				
OPPIETTE :	SINCLAIL			
Mailing Address	☐ Check if address cha	0.0, 2.2.2.5	Home Phone	Work Phone
262 LINCOLI	<u> </u>	TWIN FALLS 8	5301 (208) 7 <del>33</del> -79	380 SAME
Section II		TYPE OF REPOR	т	
Directions: To indicate the		filed, fill in the appropriate of		riate box(es). Sec the
instructional manual for rep		ie dates.	through 9 130	102
This repor	t is for the period fro	m 6 8 02	through / / Sc	5/02
☐ 7 Day Pre-Primar	y Report	☐ 7 Day Prc-General Repo	ort	1 30)
· ·	•		(only filed by balle	ot measure committees)
30 Day Post-Prim	ary Report	☐ 30 Day Post-General Re		20)
October 10 Pre-G	eneral Report	☐ Annual Report	☐ Quarterly (July (only filed by halls	ot measure committees)
A community of	eneral respon	□ Almon Report	(only filed by bank	or measure committees,
Is this Report a	n amendment?	Yes No Is	s this a Termination Report	? □ Yes 🕱 No
Section III	STATEMENT	OF NO CONTRIBUTION	S OR EXPENDITURES	
the appropriate dates and sig Section IV.	gn this report. Be sur	no contributions and have m	opriate "Calendar Year to I	•
Section IV	·	SUMMARY		
To reach your Calendar Yea	er to Date figure: Ad		COLUMN I	COLUMN II
figures to the Column II fig	ures of your previous	report (except on line 6).	This Period	Calendar Year to Date
I in a to Cook on Wood Yours	ou. 1 This Vous		f vvvvvv	6 A
Line 1: Cash on Hand Janua Line 2: Enter Cash Balance		artin a Daria dikit	\$ <u>XXXXXX</u>	\$ <u>-0-</u> \$ XXXXXX
Line 3: Total Contributions	•	_	5 7 150 7il	: 19 797 7/
Line 4: Subtotal (Add lines	•	hake */	\$ 2,776.76	\$ 10, 1 12, 17 \$ 10, 702, 71
Line 5: Total Expenditures	-	3age 2)	\$ 1, 271,04	17 339 57
Line 6: Cash Balance at Clo			1 455 77	\$ 1.455 77
			1) 7226	8-17737. he
*This same figure should be	entered on line I of	all reports filed this calenda	ur year.	
Note that the closing cash h	on nano at both the curren	beginning of the reporting per at reporting period appears o	criod and the close of the re	eporting period.
	The state of the s	troporting period appears o	in the next report as beginn	ing cash on hand.
Section V	CONTRIBUTI	ONS PLEDGED - INCUR	RED EXPENDITURES	
Contributions Pledged of	luring this reporting j	period but not yet received:	None 🗆 🗀	(see attached Schedule C-2A)
Incurred Expenditures	luring this reporting	period but not yet paid:	None 🗆\$	(see attached Schedule C-2B)
		•		(555 mm
	Section VI	CED.	TIFICATION	
Return This Report To:		•		
Pete T. Cenarrusa	1_ <i>D</i>	RIETTE SIN	CLAIR, hereby	certify that the information
Secretary of State PO Box 83720	in this r	eport is a true, complete and	correct Campaign Financi	al Disclosure Report se
Boise ID 83720-0080	required	by law.		
fax: (208) 334-2282	-	O right	Lindle die	
		Signature	of Political Treasurer	

FROM :

**DETAILED SUMMARY PAGE** 

NamcofCandidate	SHALON L. BLOCK ReportCoveringthePeriod 9 30 07
	UNITEMIZED CONTRIBUTIONS Contributions of Flity Dollars (\$50.00) or Leas This Period
	Total Total Amounts 150. 74
	UNITEMIZED EXPENDITURES Expenditures of Less Than Twenty-Five Dollars (525.00) This Period
	Total Total Amounts 48.95

	Total This Period		
NumberofScheduleApagesAttached	1		
Contributions	-		
UnitemizedContributions(\$50 and less) from topo fpage	\$ 150.74		
ItemizedContributions(totalallScheduleAshects)	\$ 150.74 \$ 2,00,00 \$ 2,150,74		
TotalContributions(alsoenterthisfigureonpage I, Section IV, line 3)	\$ 2,150.74		
/_NumberofScheduleBpagesAttached	<del>                                     </del>		
Expenditures			
UniternizedExpenditures(lessthan\$25)fromtopofpage	s 48 95		
ItemizedExpenditures(totalaliScheduleBsheets)	\$ 1.222.09		
TotalExpenditures(alsoenterthisfigureonpage1, SectionIV, line5)	\$1. 271 611		

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

<b>()</b> 1
1

Name of Calidida	SHALON L.	BLOCK	<u> </u>	
		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
7:12:02	SHARON L. BLOCK			\$ 1.500.00
☐ Primary	1093 LAKEWOOD DR.	<u> </u>	S	3 1,200.00
General	TWIN FALLS, IS. 83301	Calendar Year To Deec	Calendar Year To Date	Calendar Year to Date
8 22 02	HOUSE REPUBLICAN CAUCUS	s <u>500,00</u>	s	s
☐ Primary	V.O. BOX 1693	_	s	s
General	BOISE, ID. 83701	Calendar Year To Dass	Calendar Year To Dece	Calendar Year to Dece
	]	s	s	s
☐ Primary		c	s	S
☐ General	4.	Calcudar Year To Date	Calendar Your To Outc	Calendar Year to Date
//		s	s	S
☐ Primary				
☐ General		Calcodar Year To Date	Calendar Year To Date	Calendar Year to Date
. , ,	5.			
☐ Primary		3	\$	<u> </u>
☐ General		Calcular Your To Dess	Calendar Year To Desc	Calendar Year to Dete
	6.	<	s	s
☐ Primary		-		
☐ General		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
1 1	7.			
☐ Primary	1	3	\$	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
☐ General		Calendar Year To Dame	Calendar Your To Date	Calendar Year to Date
	3.			
☐ Primary	1	\$	S	\$
☐ General		SCalendar Yest To Date	SCalendar Year To Date	\$ Calendar Year to Date
	9.	Chemina 1 and 10 page	14 (0000	Carendar Fear to Distri
☐ Primary		S	s	s
General		S Calendar Your To Date	S	s
, ,	10.	Category Fear to Dake	Calcodar Year To Date	Colendar Year to Date
☐ Primary		<u>s</u>	s	s
☐ General		Calendar Year To Date	Calendar Year To Desc	SCalendar Year to Dose
	Subtotals of Columns A, B & C	\$ 500.00	s	\$ 1.500.00
	Total This Page (add columns A, B & C)			52.000.00

## SCHEDULE B ITEMIZED EXPENDITURES

Page of

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

Name of Candida	SHARON L. BLOCK		_
	DAHKUN L. DIVER	Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
6 23:0Z	1 U.S. POST OFFICE 253 SEMME AVE. W.	s <u>526.70</u>	s
Purpose of Abo	WE Expenditure: CAMPAISN POSTAGE		
	2 BLIP PRINTERS 214 BLUE LAKES BLVD. TWIN FAUS, ID. 83301	s <u>634.14</u>	s
	ove Expenditure: CAMPAISN . LETTEPS		
-	140 ZND AUE, NORTH TWIN FALLS, ID. 83303	s 94.45	s
	ove Expenditure: CAMPAIGN CARDS		
	HOFIZON BROADLASTING GROVE 888 NORTH COLE ROAD BOBE, ID. 83704 (FETUND)	£-239.00)	s
7	ove Expenditure: CAMPAIGN PADIO ADS		
<i>a</i> .	140 ZND AVE. NORTH TWIN FALLS, IV. B3303	s 205,80	s
	ove Expenditure: CAMIAIGN CARS		
	6.		
/		\$	\$
Purpose of Ab	ove Expenditure:		
	7.	\$	s
Purpose of Ab	ove Expenditure:		
	£.		1
		S	<u>s</u>
Purpose of Ab	ove Expenditure:		
-	9.		
		s	s
Purpose of Ab	ove Expenditure:		
	Subtotals of Columns A & B	s.1,222.09	so-
	Total This Page (add columns A & B)		so- s_1,222_09