



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

**Section I**

Name of Candidate or Political Committee and Chairperson <b>JOSEPH H. S. CANNON</b>		Office Sought (if candidate) <b>ST. ED. HOUSE OF REP.</b>	District (if any) <b>28</b>
Mailing Address <b>725 AIRPORT ROAD</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>BLACKFOOT 83221</b>	Home Phone <b>208-785-4290</b>
Name of Political Treasurer <b>RAY R. ROCKWOOD</b>		City and Zip <b>83221</b>	Work Phone <b>208</b>
Mailing Address <b>1096 BERRETT DR.</b>	<input type="checkbox"/> Check if address change.	Home Phone <b>208-785-0784</b>	Work Phone <b>785-0784</b>

**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 5/13/02 through 6/10/02

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report              | <input type="checkbox"/> 7 Day Pre-General Report   | <input type="checkbox"/> Quarterly (April 30)<br>(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)<br>(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	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 1015.65	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 3445.00	\$ 9414.73
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 4460.65	\$ 10430.38
Line 5: Total Expenditures (Enter amount from page 2)	\$ 3252.75	\$ 8194.38
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 1207.90	\$ 2223.55

\*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 RAY R. ROCKWOOD (name of Political Treasurer), hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <b>JOSEPH S. CANNON</b>	Report Covering the Period From <b>5/13/02</b> to <b>6/07/02</b>
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<b>UNITEMIZED CONTRIBUTIONS</b>	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <b>20</b>	Total Amount \$ <b>620</b>

<b>UNITEMIZED EXPENDITURES</b>	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <b>1</b>	Total Amount \$ <b>12.45</b>

	Total This Period
____ Number of Schedule A pages Attached	<b>1</b>
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <b>620<sup>00</sup></b>
Itemized Contributions (total all Schedule A sheets)	\$ <b>2825<sup>00</sup></b>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <b>3445<sup>00</sup></b>
____ Number of Schedule B pages Attached	<b>1</b>
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <b>12.45</b>
Itemized Expenditures (total all Schedule B sheets)	\$ <b>3240.30</b>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <b>3252.75</b>

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

Name of Candidate or Committee  
JOSEPH S. CANNON

		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>5/16/02</u>	<u>1. JACK W. KESLER 535 HARBOR DRIVE BLACKFOOT, ID. 83221</u>	<u>\$ 75<sup>00</sup></u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<u>\$ 75<sup>00</sup></u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/16/02</u>	<u>2. STANLEY E. COOIK 3791 CROMWELL LN. BLACKFOOT, ID. 83221</u>	<u>\$ 100<sup>00</sup></u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<u>\$ 100<sup>00</sup></u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/16/02</u>	<u>3. JOSEPH S. CANNON 725 AIR PORT ROAD. BLACKFOOT, ID. 83221</u>	<u>\$ 2000<sup>00</sup></u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<u>\$ 2500<sup>00</sup></u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/17/02</u>	<u>4. THOMAS J. ARAUE 380 N 200 EAST BLACKFOOT, ID. 83221</u>	<u>\$ 150<sup>00</sup></u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<u>\$ 150</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>6/3/02</u>	<u>5. PETER M. CANNON MD. 850 E 1500 N. SHELLEY, ID. 83274</u>	<u>\$ 500<sup>00</sup></u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<u>\$ 500<sup>00</sup></u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>6/3/02</u>	<u>6. JOSEPH S. CANNON 725 AIRPORT RD. BLACKFOOT, ID. 83221</u>	\$ _____	\$ _____	<u>\$ 1209<sup>00</sup></u>
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	<u>\$ 3053.73</u> 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>\$ 2825</u>	\$ _____	<u>\$ 4034<sup>00</sup></u>
Total This Page (add columns A, B & C)				<u>\$ 4034<sup>00</sup></u>

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

Name of Candidate or Committee  
**JOSEPH S. CANNON**

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
5/14/02	1. PIONEER PUBLICATIONS P.O. BOX P SHELLY ID. 83247	\$ 210.50	\$ _____
Purpose of Above Expenditure: <b>PICTURE WITH CAPTION</b>			
5/16/02	2. THE MORNING NEWS P.O. BOX 70 BLACKFOOT, ID. 83221	\$ 712.80	\$ _____
Purpose of Above Expenditure: <b>3 PICTURES WITH CAPTIONS</b>			
5/17/02	3. U.S. POSTMASTER 165 WEST PACIFIC BLACKFOOT, ID. 83221	\$ 510.00	\$ _____
Purpose of Above Expenditure: <b>POSTAGE</b>			
5/20/02	4. U.S. POSTMASTER 165 WEST PACIFIC BLACKFOOT, ID. 83221	\$ 1360.00	\$ _____
Purpose of Above Expenditure: <b>POSTAGE</b>			
5/21/02	5. JOSEPH S. CANNON 725 AIRPORT RD. BLACKFOOT, ID. 83221	\$ 237.60	\$ _____
Purpose of Above Expenditure: <b>REIMBURSE FOR PICTURE CAPTION IN MORNING NEWS</b>			
6/5/02	6. PIONEER PUBLICATIONS P.O. BOX P SHELLY, ID. 83274	\$ 50.00	\$ _____
Purpose of Above Expenditure: <b>ADD THANK YOU MESSAGE</b>			
6/5/02	7. U COPY PLUS 104 SE. EMERSON SUITE C SHELLY, ID. 83274	\$ 134.40	\$ _____
Purpose of Above Expenditure:			
5/20/02	8. DEPOSIT CORRECTION ZION BANK BLACKFOOT, ID.	\$ 25.00	\$ _____
Purpose of Above Expenditure: <b>DEPOSIT CORRECTION RECEIVED NOTICE AFTER</b>			
1/1/	9. SUBMITTING PRE PRIMARY REPORT	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 3240.30	\$ _____
Total This Page (add columns A & B)			\$ 3240.30

**SCHEDULE C-2B  
EXPENDITURES INCURRED BUT NOT YET PAID**

Name of Candidate or Committee <u>JOSEPH S CANNON</u>	Report Covering the Period From <u>5/13/02</u> to <u>6/07/02</u>
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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.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period: Total Number <u>1</u> Total Amount \$ <u>21<sup>00</sup></u>
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Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	Amount Incurred
<u>5/23/02</u>	<sup>1</sup> THE MORNING NEWS P.O. BOX 70 BLACKFOOT, ID 83221	\$ <u>712.80</u>
Purpose of Above Expenditure: <u>3 ADS WITH PICTURES</u>		
<u>5/24/02</u>	<sup>2</sup> THE MORNING NEWS P.O. BOX 70 BLACKFOOT, ID. 83221	\$ <u>237.60</u>
Purpose of Above Expenditure: <u>1 AD WITH PICTURE</u>		
<u>5/29/02</u>	<sup>3</sup> THE MORNING NEWS P.O. BOX 70 BLACKFOOT, ID 83221	\$ <u>237.60</u>
Purpose of Above Expenditure: <u>THANK YOU NOTE WITH PICTURE</u>		
<u>   /   /   </u>	<sup>4</sup>	
Purpose of Above Expenditure:		
<u>   /   /   </u>	<sup>5</sup>	
Purpose of Above Expenditure:		
<u>   /   /   </u>	<sup>6</sup>	
Purpose of Above Expenditure:		
<u>   /   /   </u>	<sup>7</sup>	
Purpose of Above Expenditure:		
<u>   /   /   </u>	<sup>8</sup>	
Purpose of Above Expenditure:		

Line 2: Total Amount of Incurred Expenditures \$25.00 or more	\$ <u>1188</u>
Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1)	\$ <u>21<sup>00</sup></u>
Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Section V, page 1.	\$ <u>1209<sup>00</sup></u>