## **CAMPAIGN FINANCIAL DISCLOSURE REPORT**

**SUMMARY PAGE** (Please Print or Type)

Section I								
Name of Candidate or Political Co	, , , , , , , , , , , , , , , , , , , ,	Of	Office Sought (if candidate) District (if any)					
Jerry		rowhc		enate	35			
Mailing Address  Box	Check if address charged G	City and Zip Moore &	3255 Ho	me Phone 554-4600	Work Phone			
Name of Political Treasurer	Ď.							
Resecca	Browne □ Check if address cha	1 1 1	1		1			
Mailing Address  At B 6	Check If address cha	city and zip	I .	me Phone 55 4-4800	Work Phone			
Section II		TYPE OF REPOR						
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 / 07 / 02								
☐ 7 Day Pre-Primar	y Report	☐ 7 Day Pre-General Rep		Quarterly (April 30) ly filed by ballot me	asure committees)			
30 Day Post-Prim	ary Report	☐ 30 Day Post-General Re	eport					
October 10 Pre-G	eneral Report	☐ Annual Report		Quarterly (July 30) ly filed by ballot me	asure committees)			
Is this Report a	n amendment?	Yes □ No I	s this a Tern	nination Report?	Tyes □₩o			
Section III	STATEMENT (	OF NO CONTRIBUTION	S OR EXP	ENDITURES	nj≺ <b>o</b> n			
Section IV.  ☐ I hereby certify	that I have received from/_	no contributions and have m	nade no expo	enditures during this	reporting period			
Section IV		SUMMARY						
To reach your Calendar Yea figures to the Column II figures				UMN I Period Cal	COLUMN II endar Year to Date			
Line 1: Cash on Hand Janua Line 2: Enter Cash Balance Line 3: Total Contributions Line 4: Subtotal (Add lines Line 5: Total Expenditures ( Line 6: Cash Balance at Clo	at Close of Last Repo (Enter amount from p 1, 2 and 3) Enter amount from p	page 2) page 2)	\$	0 44 s 13 44 s 50 s 13 44 s	2/02 69 2/02 69 1/939 18 1/03 42			
*This same figure should be **You must report the cash Note that the closing cash b	on hand at both the b	peginning of the reporting pe	eriod and the	e close of the reporti	ng period. ash on hand.			
Section V	CONTRIBUTI	ONS PLEDGED - INCUR	RED EXPI	ENDITURES				
Contributions Pledged d	uring this reporting p	period but not yet received:	None	□\$(	see attached Schedule C-2A)			
Incurred Expenditures	luring this reporting	□None	Ps 230	(see attached Schedule C-2B)				
Return This Report To:	Section VI	CER	TIFICATIO	ON				
Anno respons 10.	- 0 1							

Pete T. Cenarrusa Secretary of State PO Box 83720 Boise ID 83720-0080 fax: (208) 334-2282

I Kebecco A Browne , hereby certify that the informa in this report is a true, complete and correct Campaign Financial Disclosure Report as , hereby certify that the information required by law. Reloca a Browne

Signature of Political Treasurer

## SCHEDULE B ITEMIZED EXPENDITURES

Page of

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

Name of Candidate or Committee								
Jerry L. Browne								
,	Column A	Column B						
Full Name, Mailing Address and Zip Code Date of Recipient	Cash or Check	In-Kind (non-monetary)						
Acco Advertiser		,						
Date of Recipient  Acco Advertiser  59102 Arco, Id. 83213	s 250 %	\$						
Purpose of Above Expenditure: Flyers	<del> </del>							
2.								
	\$	\$						
Purpose of Above Expenditure:	Purpose of Above Expenditure:							
3.								
	\$	\$						
Purpose of Above Expenditure:								
4.								
	\$	\$						
Purpose of Above Expenditure:	.1							
5.								
	\$	\$						
Purpose of Above Expenditure:								
6.								
	s	\$						
		·						
Purpose of Above Expenditure:								
	\$	\$						
Purpose of Above Expenditure:								
8.								
	\$	\$						
Purpose of Above Expenditure:								
9.								
	s	\$						
Purpose of Above Expenditure:								
Subtotals of Columns A & B	\$	\$						
Total This Page (add columns A & B)	\$							

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

Name of Candidate or Committee  Jerry L. Brown			Report Co From	Report Covering the Period From/ to//				
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: Incurr	s <u>23</u> 0							
Incurred Expe	nditures of \$25.00 or More This Period:							
Date	Full Name, Mailing Address and Z of Recipient	Zip Code			Amount Incurred			
Incurred			······	,	Incurred			
5/21/02	Arco Advertiser 146 S. Front Arco, ID 83213				#230.00			
Purpose of Above Expenditure: FlyCr5								
	2.							
/ /								
Purpose of Abe	ove Expenditure:							
Turpose or no	3.		<u>.</u>					
Purpose of Abo	ove Expenditure:							
Purpose of Ab	ove Expenditure:	,						
	5.							
/								
Purpose of Ab	ove Expenditure:							
	6.							
Purpose of Ab	ove Expenditure:							
	7.							
Purpose of Ab	ove Expenditure:							
	8.							
Purpose of Ab	ove Expenditure:							
Line 2: Total	Amount of Incurred Expenditures \$25.00 or more				\$			
Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1)					\$			
Line 4: Total	Amount of Incurred Expenditures this Period (add line	s 2 and 3) Also enter	this total in Sec	ction V, page 1.	\$			