



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

**POSTED**

**Section I**

Name of Candidate or Political Committee and Chairperson <u>Peter Nielsen</u>		Office Sought (if candidate) <u>Representative</u>	District (if any) <u>22-B</u>
Mailing Address <u>3955 S. 136 W.</u>	<input type="checkbox"/> Check if address change.	City and Zip <u>Mtn. Home AFB 83647</u>	Home Phone <u>208-832-4382</u>
Name of Political Treasurer <u>Merleen Johns</u>		Home Phone <u>208-832-4382</u>	Work Phone <u>208-832-4382</u>
Mailing Address <u>48803 Hwy. 78</u>	<input type="checkbox"/> Check if address change.	City and Zip <u>Mtn. Home 83647</u>	Home Phone <u>208-366-7734</u>
		Home Phone <u>208-366-7734</u>	Work Phone <u>208-580-2814</u>

MAY 15 AM 7:02  
SECRETARY OF STATE  
IDAHO

**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 Jan 1 / 05 through Dec 31 / 05

- 7 Day Pre-Primary Report     
  30 Day Post-Primary Report     
  October 10 Pre-General Report  
 7 Day Pre-General Report     
  30 Day Post-General Report     
  Annual Report  
 Semi-Annual Report (Statewide Candidates Only)

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*	\$ <u>XXXXXX</u>	\$ <u>2881.61</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>2881.61</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>1101.55</u>	\$ <u>1101.55</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>3983.16</u>	\$ <u>3983.16</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>620.50</u>	\$ <u>620.50</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>3362.66</u>	\$ <u>3362.66</u>
Line 7: Outstanding Debt to Date	\$ <u>0</u>	

\*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**

**CERTIFICATION**

Return This Report To:  
Ben Ysursa  
Secretary of State  
PO Box 83720  
Boise ID 83720-0080  
phone: (208) 334-2852  
fax: (208) 334-2282

I Merleen Johns  
(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.

Merleen Johns  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <u>Peter Nielsen</u>	Report Covering the Period From <u>1/1/05</u> to <u>12/31/05</u>
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### UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 1      Total Amount \$ 1.55

### UNITEMIZED EXPENDITURES

Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total Number 0      Total Amount \$ 0

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>1.55</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>1100.00</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>1101.55</u>
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>0</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>620.50</u>
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ <u>0</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>620.50</u>
<u>    </u> Number of Schedule C-2B pages Attached	
<b>Incurred Expenditures</b>	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ <u>0</u>
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ <u>0</u>
Subtotal	= \$ <u>0</u>
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ <u>0</u>
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ <u>0</u>
<u>    </u> Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	
Amount Pledged this Period	\$ <u>0</u>

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

Name of Candidate or Committee  
Peter Nielsen

Date/Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Leader	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
<u>2/28/05</u>	<sup>1</sup> Emeritus Corp. Clearing V 3131 Elliot Ave. Suite 500 Seattle, WA 98121	\$ <u>250.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>250.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>11/9/05</u>	<sup>2</sup> Idaho Dental Political Action Cm 1220 W. Hays Boise, ID 83702	\$ <u>250.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>250.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>11/9/05</u>	<sup>3</sup> Corrections Corp. of America 10 Burton Hills Blvd. Nashville, TN 37215	\$ <u>300.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>300.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>11/16/05</u>	<sup>4</sup> Qwest - Idaho PAC 999 Main St. 11th Floor Boise, ID 83702	\$ <u>300.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>300.00</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u>	<sup>5</sup>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u>	<sup>6</sup>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u>	<sup>7</sup>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u>	<sup>8</sup>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u>	<sup>9</sup>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>   /   /   </u>	<sup>10</sup>	\$ _____	\$ _____	\$ _____
<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>1100.00</u>	\$ <u>0</u>	\$ <u>0</u>
Total This Page (add columns A, B & C)				\$ <u>1100.00</u>

**SCHEDULE B  
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee  
Peter Nielsen

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
<u>2/14/05</u>	<sup>1</sup> Idaho House Republican Caucus Idaho State Capital Boise, ID 83720	\$ <u>50.00</u>	\$ _____
Purpose of Above Expenditure: <u>Fundraiser</u>			
<u>4/28/05</u>	<sup>2</sup> Glens Ferry Chamber of Commerce 7 E 1 Ave Glens Ferry, ID 83623	\$ <u>25.00</u>	\$ _____
Purpose of Above Expenditure: <u>Dues to Chamber of Commerce</u>			
<u>5/26/05</u>	<sup>3</sup> Elmore County GOP Central Comm. 460 W 425a. Mtn. Home, ID 83647	\$ <u>100.00</u>	\$ _____
Purpose of Above Expenditure: <u>Help with GOP Golf Tourney</u>			
<u>10/28/05</u>	<sup>4</sup> Associated Taxpayers of Id. 802 W. Bannock Boise, ID 83702	\$ <u>55.00</u>	\$ _____
Purpose of Above Expenditure: <u>Convention of Taxes For ID + Info on the Economy</u>			
<u>11/11/05</u>	<sup>5</sup> Elmore County GOP 460 W 425a. Mtn. Home, ID 83647	\$ <u>25.00</u>	\$ _____
Purpose of Above Expenditure: <u>Veterans Memorial Banquet</u>			
<u>12/3/05</u>	<sup>6</sup> The Idaho World P.O. Box 220 Idaho City, Id 83631	\$ <u>25.00</u>	\$ _____
Purpose of Above Expenditure: <u><del>Veterans Memorial</del> Newspaper Subscription</u>			
<u>12/19/05</u>	<sup>7</sup> Mtn. Home News 195 S. 3 E Mtn. Home, ID 83647	\$ <u>266.50</u>	\$ _____
Purpose of Above Expenditure: <u>Advertising</u>			
<u>12/20/05</u>	<sup>8</sup> Postmaster Mtn. Home Post Office Mtn. Home, ID 83647	\$ <u>74.00</u>	\$ _____
Purpose of Above Expenditure: <u>Stamps For Mailings</u>			
<u>  /  /  </u>	<sup>9</sup> _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
Subtotals of Columns A & B		\$ <u>620.50</u>	\$ <u>0</u>
Total This Page (add columns A & B)		\$ <u>620.50</u>	