

POSTED

C-2 Rev. 04/04



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

SCANNED

07 FEB - 7:34 AM: 52282

Section I

Form with fields for Name of Candidate, Mailing Address, Name of Political Treasurer, Office Sought, District, Home Phone, and Work Phone. Includes handwritten entries for Tom Gatzfield and Judith I. Gatzfield.

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.

- Checkboxes for 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, and Semi-Annual Report. Includes handwritten dates 1/1/06 through 12/31/06.

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.

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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand, Total Contributions, Subtotal, Total Expenditures, Cash Balance, and Outstanding Debt.

*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.

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

Section V

CERTIFICATION

Handwritten signature of Judith Gatzfield, 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	Report Covering the Period From ___/___/___ to ___/___/___
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UNITEMIZED CONTRIBUTIONS

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

Total Number 0 / 1 Total Amount \$ ~~108.29~~ 8.06 *interest*

UNITEMIZED EXPENDITURES

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

Total Number 0 Total Amount \$ 0

	Total This Period
Number of Schedule A pages Attached	
Contributions	0
Unitemized Contributions (≤\$50 and less) from top of page	\$ 108.29 <u>8.06</u> <i>of</i>
Itemized Contributions (total all Schedule A sheets)	\$ 108.29
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 0
Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 0
Itemized Expenditures (total all Schedule B sheets)	\$ <u>108.29</u>
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>108.29</u>
Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 0
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ 0
Subtotal	= \$ 0
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ 0
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 0
Number of Schedule C-2A pages Attached	0
Pledged Contributions	0
Amount Pledged this Period	\$ 0

SCHEDULE C-2B
EXPENDITURES INCURRED (Debts and Obligations) & PAYMENT MADE ON DEBT

Name of Candidate or Committee <u>Tom Gatzfield</u>	Report Covering the Period From <u>11/1/06</u> to <u>12/31/06</u>
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Directions: Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service or made a payment on debt. Do not include these entries on Schedule B.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period: Total Number _____ Total Amount \$ _____

Expenditures Incurred (Debts and Obligations) or Payment Made on Debt of \$25.00 or More This Period:

No.	Full Name, Mailing Address and Zip Code or Creditor	Purpose of Expenditure
1.	<u>Larry Grant</u> <u>2195 W 2 Ave</u> <u>Fruitland, 93619</u>	<u>Contribution to Larry Grant Campaign</u> <u>Larry Grant Campaign</u> <u>Larry Grant</u> <u>2195</u>
Outstanding Balance beginning this period.. \$ <u>0</u>		
Amount Incurred this period..... \$ <u>0</u>		Date Incurred _____
Payment this period..... \$ <u>108.29</u>		Date of Payment <u>10/26/06</u>
Outstanding Balance..... \$ <u>0</u>		
2.		
Outstanding Balance beginning this period.. \$ _____		Date Incurred _____
Amount Incurred this period..... \$ _____		Date of Payment _____
Payment this period..... \$ _____		
Outstanding Balance..... \$ _____		
3.		
Outstanding Balance beginning this period.. \$ _____		Date Incurred _____
Amount Incurred this period..... \$ _____		Date of Payment _____
Payment this period..... \$ _____		
Outstanding Balance..... \$ _____		
4.		
Outstanding Balance beginning this period.. \$ _____		Date Incurred _____
Amount Incurred this period..... \$ _____		Date of Payment _____
Payment this period..... \$ _____		
Outstanding Balance..... \$ _____		
5.		
Outstanding Balance beginning this period.. \$ _____		Date Incurred _____
Amount Incurred this period..... \$ _____		Date of Payment _____
Payment this period..... \$ _____		
Outstanding Balance..... \$ _____		

Totals of this Page

Line 2: Amount Incurred This Period (Carry forward to Page 2, Under Incurred Expenditures) \$ _____

Line 3: Payment This Period (Carry forward to Page 2, under Expenditures and Incurred Expenditures) \$ _____