



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

**Section I**

Name of Candidate or Political Committee and Chairperson <b>DONALD McMURRIAN SR</b>		Office Sought (if candidate) <b>Representative</b>	District (if any) <b>TE 12</b>
Mailing Address <b>603 20th AVE N</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>NAMPA 83703</b>	Home Phone <b>208-467-4123</b>
Name of Political Treasurer <b>DONALD McMURRIAN JR.</b>			
Mailing Address _____	<input type="checkbox"/> Check if address change.	City and Zip _____	Home Phone _____
		Work Phone _____	

**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 06/03/06 through 09/30/06

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> 7 Day Pre-Primary Report                       | <input type="checkbox"/> 30 Day Post-Primary Report | <input checked="" type="checkbox"/> October 10 Pre-General Report |
| <input type="checkbox"/> 7 Day Pre-General Report                       | <input type="checkbox"/> 30 Day Post-General Report | <input type="checkbox"/> Annual Report                            |
| <input type="checkbox"/> 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*	\$ XXXXXX	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 0	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 1705	\$ 1705
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 1705	\$ 1705
Line 5: Total Expenditures (Enter amount from page 2)	\$ 1100.39	\$ 1100.39
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 604.61	\$ 604.61
Line 7: Outstanding Debt to Date	\$ 650	

\*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.

**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**

I DON McMURRIAN JR., hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

*Don McMurrrian*  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <b>DONALD MCMURRIAN SR.</b>	Report Covering the Period From <b>06/03/06</b> to <b>09/30/06</b>
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<b>UNITEMIZED CONTRIBUTIONS</b>	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <b>0</b>	Total Amount \$ <b>0</b>

<b>UNITEMIZED EXPENDITURES</b>	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <b>3</b>	Total Amount \$ <b>43.04</b>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <del>0.00</del>
Itemized Contributions (total all Schedule A sheets)	\$
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <b>17.05</b>
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <b>43.04</b>
Itemized Expenditures (total all Schedule B sheets)	\$ <b>1057.35</b>
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ <b>0.00</b>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <b>1100.39</b>
<u>1</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)	\$ <b>0.00</b>
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ <b>650.00</b>
Subtotal	= \$ <b>650.00</b>
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ <b>0.00</b>
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ <b>650.00</b>
Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	<del>0</del>
Amount Pledged this Period	\$ <del>0</del>

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

Name of Candidate or Committee

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
07/26/06	1. DON McMURRIAN 868 N. Mercer St BOISE IDAHO 83703	\$ 500	\$ 0	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
07/26/06	2. Robert Grubbs P.O BOX 171 BLISS, IDAHO 83314	\$ 55	\$ 0	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
07/25/06	3. DAVID SNEDDON 351 E. CURLING DRIVE BOISE ID. 83702	\$ 200	\$ 0	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
07/25/06	4. DONNA CHRISTENSEN 2447 LOKNESS WAY MERIDIAN ID. 83642	\$ 200	\$ 0	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
8/14/06	5. ESSAM ASSAAD 1310 N. 16th St. BOISE ID. 83702	\$ 100	\$ 0	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
9/25/06	6. DON McMURRIAN 868 N. Mercer St. BOISE Id. 83703	\$ 0	\$ 0	\$ 650
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
____/____/____	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
____/____/____	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
____/____/____	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
____/____/____	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		\$ 1055	\$ 0	\$ 650
Total This Page (add columns A, B & C)				\$ 1705

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

Name of Candidate or Committee

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
8/29/06	1. Idaho Senior Independent NEWS P.O. BOX 3341 Great Falls, MT 59403-3341	\$ 334 <sup>00</sup>	\$ 0
Purpose of Above Expenditure: Campaign Ad			
09/12/06	2. OFFICE DEPOT 216 Caldwell BLVD Nampa ID 83651	\$ 33 <sup>04</sup>	\$ 0
Purpose of Above Expenditure: OFFICE SUPPLIES			
9/6/06	3. GUSHER GAS Station 334 3rd St. S. Nampa ID. 83686	\$ 40 <sup>31</sup>	\$ 0
Purpose of Above Expenditure: GASOLINE			
9/25/06	4. Bulah Hunsperger 1125 POWELL AVE Nampa ID. 83687	\$ 50 <sup>00</sup>	\$ 0
Purpose of Above Expenditure: Cleaning Fee - EAGLES HALL FUNDRAISER			
9/25/06	5. Eagles-Nampa Aerie 2103 118 11th Ave N. Nampa ID. 83687	\$ 600 <sup>00</sup>	\$ 0
Purpose of Above Expenditure: FEE FOR USE OF EAGLES HALL - FUND RAISER			
/ /	6.	\$	\$
Purpose of Above Expenditure:			
/ /	7.	\$	\$
Purpose of Above Expenditure:			
/ /	8.	\$	\$
Purpose of Above Expenditure:			
/ /	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 1057.35	\$ 0
Total This Page (add columns A & B)		\$ 1057.35	

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

Name of Candidate or Committee <b>DONALD MCMURRIAN SR</b>	Report Covering the Period From <b>06/03/06</b> to <b>09/30/06</b>
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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.

<b>Line 1: Incurred Expenditures of Less Than \$25.00 This Period:</b>	Total Number <u>0</u>	Total Amount \$ <u>0</u>
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**Expenditures Incurred (Debts and Obligations) or Payment Made on Debt of \$25.00 or More This Period:**

Full Name, Mailing Address and Zip Code of Creditor	Purpose of Expenditure
1. <b>DON MCMURRIAN JR. 868 N. Mercer St. BOISE IDAHO</b>	<del>FEES</del> <b>FEES for FUNDRAISER @ EAGLES HALL</b>
Outstanding Balance beginning this period..... \$ <u>650</u>	Date Incurred <u>9-25-06</u>
Amount Incurred this period..... \$ <u>650</u>	Date of Payment _____
Payment this period..... \$ <u>0</u>	Outstanding Balance..... \$ <u>650</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) \$ \_\_\_\_\_