C-2 Rev. 06/04



## CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

| Section I  |                             |                               |                       |                   |                         |
|--|-----------------------------|-------------------------------|-----------------------|-------------------|-------------------------|
| Name of Candidate or Political Con   | mmittee and Chairperson     |                               | Office Sough          | (if sandidate) of | District (if any)       |
| TOM GANI   |                             |                               | STATE S               | ENATE             | HIT 9:23                |
| Mailing Address  | ☐ Check if address change.  | City and Zip                  | Home Phone            | AMILIA TARVE      | Vork Phone              |
| 4180 NORTH   | 1572 EAST                   | BUNL 83                       | 316 543-2             | 335 AR            | 543-5650                |
| Name of Political Treasurer  |                             |                               |                       | SIAIL OF          | DAHO                    |
| DEXTER KOG<br>Mailing Address  | Check if address change.    | City and Zip                  |                       | 1,,               |                         |
|  |                             |                               | Home Phone            |                   | Vork Phone              |
| 4190 NORTH   | 1566 EAST                   | Bull, 833                     | 16 543-3              | 360 1             | 543-5560                |
| Section II   |                             | TWDE OF DEDOE                 | NT.                   |                   |                         |
| Directions: To indicate the  | type of report being filed, | TYPE OF REPOR                 |                       | ppropriate box    | (es). See the           |
| instructional manual for rep   | orting periods and due da   | tes.                          |                       |                   |                         |
| This report  | rt is for the period from _ | 51810                         | through 6             | 1 2 1             | 06                      |
| ☐ 7 Day Pre-Primary  | Report 💢 3                  | 30 Day Post-Primary R         | eport 🔲 (             | October 10 Pre    | e-General Report        |
| ☐ 7 Day Pre-General  | Report                      | 30 Day Post-General R         | eport                 | Annual Report     |                         |
| ☐ Semi-Annual Repo   | ort (Statewide Candidates   | Only)                         |                       |                   |                         |
| Is this Report as  | n amendment?                | ☐ No Is th                    | is a Termination Rep  | ort?              | s 🔲 No                  |
| Section III  | STATEMENT OF N              | O CONTRIBUTION                | S OR EXPENDITU        | JRES              |                         |
| Directions: If you had no c  | antributions or expenditur  | ac during this reporting      | a period check the be | ov nevt to the    | statement below fill in |
| the appropriate dates and sig  | en this report. Be sure to  | carry forward the appr        | opriate "Calendar Yes | ar to Date" figu  | ares in Column II,      |
| Section IV.  | ,                           | , · · ·                       |                       |                   |                         |
| ☐ I hereby certify t   | hat I have received no con  |                               |                       |                   | orting period           |
|  | from/                       | / through                     | ///                   | ·                 |                         |
| Section IV   |                             | SUMMARY                       |                       |                   |                         |
| To reach your Calendar Yea   | r to Date figure: Add this  | report's Column I             | COLUMN I              |                   | OLUMN II                |
| figures to the Column II fig   | ures of your previous repo  | ort (except on line 6).       | This Period           | Calend            | dar Year to Date        |
| Line 1. Cook on Hand Januar  | and This Vace*              |                               | \$ XXXXXX             | •                 | 5301.81                 |
| Line 1: Cash on Hand Janua   | •                           | a Dariod**                    | \$ 6381.9             |                   | XXXXXX                  |
| Line 2: Enter Cash Balance<br>Line 3: Total Contributions                              |                             | -                             | \$ 200.0              | •                 | 1850.00                 |
| Line 4: Subtotal (Add lines  |                             | 2)                            | \$ 1.581.60           |                   | 215181                  |
| Line 5: Total Expenditures   |                             | 2)                            | \$ 1128.00            | 5 ° -             | 39177                   |
| •  |                             |                               | \$ 6780 00            | / \$ _            | 2760.04                 |
| Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**  \$ 6760.04    |                             |                               |                       |                   |                         |
| Line 7: Outstanding Debt to  | Date                        |                               | \$0-                  | -                 |                         |
| *This same figure should be entered on line 1 of all reports filed this calendar year. |                             |                               |                       |                   |                         |
| **You must report the cash   |                             |                               |                       |                   |                         |
| Note that the closing cash l   | parance for the current rep | orning period appears         | on the next report as | beginning cash    | on nand,                |
|  |                             |                               |                       | ,                 |                         |
|  | Section V                   | CER                           | RTIFICATION           |                   |                         |
| Return This Report To:   |                             | 0                             | )                     |                   |                         |
| Ben Ysursa   | I <i>DE</i>                 | XTER KA                       | GERS, h               | ereby certify t   | hat the information     |
| Secretary of State   | in this report              | (name of Political Treasurer) | d correct Campaign F  | Financial Discl   | osure Report as         |

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fax: (208) 334-2282

in this report is a true, comple required by law.

## **DETAILED SUMMARY PAGE**

| Name of Candidate or Committee  Tom GANNON     | Report Covering the Period From 5 1 8 10 6 to 6 1 2 1 5 6 |
|--|---|
| UNITEMIZED CO Contributions of Fifty Dollars   |   |
| Total<br>Number O                              | Total Amount \$O  |
| UNITEMIZED E Expenditures of Less Than Twenty- |   |
| Total<br>Number — 6 —                          | Total Amount \$ U   |

|  | To   | otal This Period |
|--|------|------------------|
|  |      |                  |
| Contributions  |      |                  |
| Unitemized Contributions (\$50 and less) from top of page                                  | \$   | -0-              |
| Itemized Contributions (total all Schedule A sheets)                                       | \$   | 200.00           |
| Total Contributions (also enter this figure on page 1, Section IV, line 3)                 | \$   | 200,00           |
| Number of Schedule B pages Attached  |      |                  |
| Expenditures   |      |                  |
| Unitemized Expenditures (less than \$25) from top of page                                  | \$   | -0-              |
| Itemized Expenditures (total all Schedule B sheets)  | \$   | (178.05)         |
| 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)                  | \$   | (128,05)         |
| Number of Schedule C-2B pages Attached   |      |                  |
| Incurred Expenditures  |      |                  |
| Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7 | 5    |                  |
| Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)       | +3   |                  |
| Subtotal   | = \$ |                  |
| Payment this Period (Total all C-2Bs - Payment this Period)                                | - \$ |                  |
| Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)    | = \$ | X                |
| Number of Schedule C-2A pages Attached   | /    |                  |
| Pledged Contributions  |      |                  |
| Amount Pledged this Period   | /s   |                  |

SCHEDULE A Page 1 Of 3 ITEMIZED CONTRIBUTIONS

of more than Fifty Dollars (\$50.00) this period

Name of Candidate: Tom Gannon

| Date/<br>Receipt For | : Full Name, Mailing Address and Zip Code: : of Contributor/Lender :     | Cash or                  | :(non monetary)          | Loans                      |
|----------------------|--|--------------------------|--------------------------|----------------------------|
|                      | :1. Clear Springs Foods<br>: P.O. Box 712<br>: Buhl, Idaho 83316         | \$200.00                 | \$0.00<br>\$0.00<br>CYID | :\$<br>:\$                 |
| Primary              | :2.<br>:   | \$0.00<br>CYTD           | \$0.00<br>\$0.00         | :                          |
| Primary              | ;3. ;  | \$0.00<br>\$0.00<br>CYYD | :\$<br>:\$<br>: CYID     | :\$ : CYTD :               |
| Primary              | ; 4.<br>;  | \$0.00<br>\$0.00<br>CYTD | \$0.00<br>\$0.00         | :\$ :<br>:\$ :<br>: CYTD : |
| Primary              | :5.<br>: :   | \$0.00<br>\$0.00<br>CYTD | \$0.00<br>\$0.00         | :\$ :<br>:\$ :             |
| Primary              | :6. :<br>! :   | \$0.00<br>\$0.00         | \$0.00<br>\$0.00<br>EYTD | :\$ :<br>:\$ :<br>: CYTD . |
| Primary              | :7.<br>:   | \$0.00<br>\$0.00         | :\$<br>:\$<br>: CYTD     | :\$ : CYTD :               |
| Primary              | 18.  | \$<br>\$                 | \$0,00<br>\$0,00<br>CYTD | :\$ :                      |
| Primary              | :9. ::<br>: ::   | CYTD                     |                          | : EYTD :                   |
| Primary              | :10.   | E CYTD                   | \$0.00<br>\$0.00<br>CYTD | : CYTD                     |
|                      | Subtotals of Columns A,B & C   | \$200.00                 | \$0.00                   | \$0.00:                    |
|                      | Total This Page (add columns A,B & C)  Report for period ending 6-2-2006 |                          | ;                        | ; \$200,00 ;               |

## SCHEDULE B Page 1 Of 1

## ITEMIZED EXPENDITURES

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

| Name of Candid                   | date: Tom Gannon  |                |   |
|----------------------------------|---|----------------|---|
| :<br>:<br>Date                   |   | : Cash or      | : Column B :<br>: In-Kind :<br>:(non monetary): |
| 5-8-06 :1                        | . National Conference of State Legislatur                                     | •              | ; ; ;   |
|                                  | ove Expenditure: Partial refund of confere<br>Chairman's meeting in Oct. 2005 | ence expense   |   |
|                                  | 2. Exxon/Mobile<br>Moscow, Idaho 83843  |                | ; ;<br>; ;                                      |
| Purpose of Abo                   | ove Expenditure: Gas for return to Buhl                                       |                |   |
|                                  | 3. Flying J Travel Plaza<br>3353 Federal Way<br>Boise, Idaho 93704            | ; \$31.49<br>; | : :   |
| Purpose of Abo<br>Sovernor's in: | ove Expenditure: Gas for trip to Boise to<br>auguration.                      | attend         |   |
| Primary :                        | ). Not Used   | ;              | ; ;<br>; ;                                      |
| Purpose of Abo                   | ove Expenditure:  |                |   |
| :5<br>Primary :                  | 5. Not Used   | :              | ; ;   |
| Purpose of Abo                   | ove Expenditure:  |                |   |
| Primary :                        | 5. Not Used   | ;              | ; ;   |
|                                  | ove <b>Expe</b> nditure:  |                |   |
|                                  | Subtotals of Columns A,B  | : (\$178.05)   |   |
|                                  | Total This Page (add columns A,B)   |                | : (\$178.05):                                   |

Report for period ending 6-2-2006