C-2 Rev. 04/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Name of Political Treasurer Audress City and Zip Home Phone 208-238-6964 208-233- 208-233-6964 208-233- 208-233-6964 208-233- 208-233-6964 208-233-	ction I						
Mailing Address Check if ackness changes City and Zip Home Phone 208-236-6984 208-233-Name of Political Treasurer Audrey Cole					Office Sought (if car	rdidate)	District (if any)
Section II STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES		pson)		na		1 (5) nac	
Name of Political Treasure Audirey L. Cole Mailing Address Cliv and Zip		☐ Check if address change.	,			·	
Audrey L. Cole Check if eddress change. City and Zip Home Phone 208-233-6744 Work Phone 520 Skyline Dr. Pocatello 83204 208-233-6744 Pocatello 83204 Poca			Pocatello 83201		208-236-69	64	208-233-0132
Pocatello 83204 208-233-6744 Pasicetton II TYPE OF REPORT							G 3
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 0.5 / 28 / 06 through 0 / 0.2 / 0.6 7 Day Pre-Primary Report 30 Day Post-General Report Annual 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 bel the appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Colur Section IV 1 hereby certify that I have received no contributions and have made no expenditures during this reporting period from hrough through ColuMN II figures to the Column II figures of your previous report (except on line 6). Section IV	iling Address	☐ Check if address change.	City and Zip		Home Phone		Work Phone
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 0.5 / 0.8 / 0.6 through 0.7 / 0.2 / 0.6 through 7 Day Pre-Primary Report	20 Skyline Dr.		Pocatello 83204		208-233-67	44	na 🕥
7 Day Pro-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 No No No No Is this a Termination Report? Yes No No No No No No Is this a Termination Report? Yes No No No No No No No N	irections: To indicate the ty	orting periods and due da	fill in the appropriate	dates and		-	
Semi-Annual Report (Statewide Candidates Only) Is this Report an amendment? Yes No Is this a Termination Report? Yes No No Is this a Termination Report? Yes No No Is this a Termination Report? Yes No No No No No No No N	7 Day Pre-Primary	Report 🖸 :	30 Day Post-Primary R	eport	☐ Octob	er 10 F	Pre-General Report
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 bethe appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Colum Section IV. I hereby certify that I have received no contributions and have made no expenditures during this reporting period from	☐ 7 Day Pre-General !	Report 🔲 3	30 Day Post-General R	eport	☐ Annu	al Repo	ort
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 belthe appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Colur Section IV. Section IV SUMMARY To reach your Calendar Year to Date figure: Add this report's Column I GoluMN II figures to the Column II figures of your previous report (except on line 6). Line 1: Cash on Hand January 1, This Year* \$XXXXXX \$ 19,079.0 Line 2: Enter Cash Balance at Close of Last Reporting Period** \$ 33,098.13 \$ XXXXXX \$ 19,079.0 Line 4: Subtotal (Add lines 1, 2 and 3) \$ 33,352.60 \$ 47,933.4 Line 5: Total Contributions (Enter amount from page 2) \$ 2,376.71 \$ 16,957.4 Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** \$ 30,975.97 \$ 30,975.9 Line 7: Outstanding Debt to Date \$ 0.00 *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 Bosse ID 83720-0880 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.	☐ Semi-Annual Repor	t (Statewide Candidates	Only)				
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Line 1: Cash on Hand January 1, This Year* Line 2: Enter Cash Balance at Close of Last Reporting Period** \$ 33,098.13 \$ XXXXXX Line 3: Total Contributions (Enter amount from page 2) \$ 254.55 \$ 28,854.3 Line 4: Subtotal (Add lines 1, 2 and 3) \$ 33,352.68 \$ 47,933.4 Line 5: Total Expenditures (Enter amount from page 2) \$ 2,376.71 \$ 16,957.4 Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** \$ 30,975.97 \$ 30,975.9 Line 7: Outstanding Debt to Date \$ 0.00 *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 **Return This Report To: Ben Ysursa Secretary of State PO Box 83720 Boise ID 83720-0080	ection IV o reach your Calendar Year	from/_ to Date figure: Add this	SUMMARY s report's Column I	/_ 	olumn i		COLUMN II
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Line 3: Total Contributions (Enter amount from page 2) \$ 254.55 \$ 28,854.3 Line 4: Subtotal (Add lines 1, 2 and 3) \$ 33,352.68 \$ 47,933.4 Line 5: Total Expenditures (Enter amount from page 2) \$ 2,376.71 \$ 16,957.4 Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** \$ 30,975.97 \$ 30,975.9 Line 7: Outstanding Debt to Date \$ 0.00 *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 Y sursa Secretary of State PO Box 83720 Boise ID 83720-0080 **Ben State Pool Box 83720 Boise ID 83720-0080	ne 1: Cash on Hand Januar	y 1, This Year*		\$ <u>X</u>	XXXXX	\$_	19,079.07
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Line 5: Total Expenditures (Enter amount from page 2) \$ 2,376.71 \$ 16,957.4 Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** \$ 30,975.97 \$ 30,975.9 Line 7: Outstanding Debt to Date \$ 0.00 *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:	ne 3: Total Contributions (2)	\$	254.55	\$_	28,854.38	
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Return This Report To: Ben Ysursa Secretary of State PO Box 83720 Boise ID 83720-0080 I Audrey L. Cole hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report required by law.	You must report the cash of	on hand at both the begin	ning of the reporting p	eriod and			
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Secretary of State PO Box 83720 Boise ID 83720-0080 Required by law. Common of Political Tressurer) International Contract Campaign Financial Disclosure Report	Return This Report To:						
Boise ID 83720-0080 required by law.							
Boise ID 83720-0080 required by law.	Secretary of State (name of Political Tressurer) PO Roy 83720 in this report is a true, complete and correct Campaign Financial Disclosure Report						
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	phone: (208) 334-2852	Miles X lan					
fax: (208) 334-2282 Signature of Pohitcal Treasurer	fax: (208) 334-2282		Signatura	of Pok	Cal Tragerman		****************************

Page 1

SCHEDULE A ITEMIZED CONTRIBUTIONS

Page	of
1	2

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

Name of Candidate or Committee		
Bannock County Democratic Party		

		Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
05 / 09 / 06	Catalina Steckbauer	s10.00	\$	\$
Primary General	363 Valleyview Dr. Pocatello 83204	\$ 50.00	\$Calendar Year To Date	\$Calendar Year to Date
/ /	2.	S	\$	\$
Primary		\$	\$	\$
General	3.	Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
Primary		\$	\$	\$
General	4.	Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
//		\$	\$	\$
Primary General		S Calendar Year To Date	\$Calendar Year To Date	\$Calcondar Year to Date
//	5.	s	\$	\$
Primary General		SCalendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date
/ /	6.	s	s	s
Primary		\$	\$	\$
General	7.	Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
Primary		\$	\$	\$
General	8.	Calendar Year To Date	Calcadar Year To Date	Calendar Year to Date
Primary		\$	\$	\$
General	9.	S Calendar Year To Date	SCalendar Year To Date	Calcudar Year to Date
/		s	\$	\$
Primary General		\$Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date
Subtotals of Columns A, B & C \$			\$0.00	\$0.00
	Total This Page (add columns A, B & C)			\$