

C-2 Rev. 04/04



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

06 OCT 31 PM 4:43

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson (Phil Hart), Office Sought (STATE OF IDAHO), District (3B), Mailing Address (4430 E Sarah Loop), City and Zip (Athol, 83801), Home Phone (683-0456), Work Phone (772-2522), Name of Political Treasurer (John Malloy), and their respective addresses and phone numbers.

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 01 / 01 / 2006 through 05 / 07 / 2006

- Checkboxes for report types: 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? [X] Yes [] No Is this a Termination Report? [] Yes [X] 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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand January 1, Total Contributions, Total Expenditures, and Cash Balance at Close of Period.

*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 Vaurus, Secretary of State, PO Box 83720, Boise ID 83720-0090, phone: (208) 334-2852, fax: (208) 334-2282

Section V

CERTIFICATION

I JOHN W MALLOY, 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 (Handwritten signature)

DETAILED SUMMARY PAGE

Name of Candidate or Committee PHIL HART	Report Covering the Period From 1/1/06 to 5/7/06
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UNITEMIZED CONTRIBUTIONS Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number 3	Total Amount \$ 150.00
UNITEMIZED EXPENDITURES Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number Ø	Total Amount \$ Ø

	Total This Period
<u>2</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 150.00
Itemized Contributions (total all Schedule A sheets)	\$ 5575.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 5725.00
<u>2</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ Ø
Itemized Expenditures (total all Schedule B sheets)	\$ 5926.38
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ Ø
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 5926.38
<u>1</u> Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 7774.37
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ Ø
Subtotal	= \$ 7774.37
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ Ø
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 7774.37
<u>Ø</u> Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$

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

Name of Candidate or Committee: PHIL HART

5-17-06
as per
P.T.

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A Cash or Check	Column B In-Kind (non-monetary)	Column C Loans
<u>4/14/06</u>	¹ GREYHOUND PARK + EVENT CTR 5100 RIVERBEND AVE POST FALLS, ID 83854	\$ <u>1000.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/13/06</u>	² MICRON TECHNOLOGY 8000 S. FEDERAL WAY BOISE, ID 83707	\$ <u>300.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/11/06</u>	³ DEPT. OF ECONOMICS & MATH <u>Wenders</u> 2266 WESTVIEW DR. <u>John</u> MOSCOW, ID 83843	\$ <u>500.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/18/06</u>	⁴ IDAHO POWER CO. PO BOX 70 BOISE, ID 83707	\$ <u>750.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/19/06</u>	⁵ UNION PACIFIC R.R. CHARLIE CLARK PO BOX 1745 BOISE, ID 83701	\$ <u>350.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/20/06</u>	⁶ ID COMM. ON HOSPITALITY + SPORTS PO BOX 328 BOISE, ID 83701	\$ <u>1000.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/21/06</u>	⁷ JAE + LYNNE THREASGILL PO BOX 1047 COEUR D'ALENE, ID 83816	\$ <u>75.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/25/06</u>	⁸ IDA BANK PAC STATE FUND PO BOX 638 BOISE, ID 83701	\$ <u>100.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/25/06</u>	⁹ MIKE MOYLE 1239 MAPLE ST. MERIDIAN, ID 83642	\$ <u>500.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>5/2/06</u>	¹⁰ ROBIN ISAACSON 8289 N. WESTVIEW DR. COEUR D'ALENE, ID 83815	\$ <u>200.00</u>	\$ _____	\$ _____
<input checked="" 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>4775.00</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ <u>4775.00</u>

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

Name of Candidate or Committee PHIL HART

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
<u>5/2/06</u>	<u>1. TWO JINN, INC ALADDIN BAIL BONDS 1959 PALOMAR OAKS WAY #200 CARLSBAD, CA 92011</u>	\$ <u>500.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>4/19/06</u>	<u>2. LAWRENCE DENNEY PO BOX 114 MIDVALE, ID 83645</u>	\$ <u>300.00</u>	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	<u>3.</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	<u>4.</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	<u>5.</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	<u>6.</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	<u>7.</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	<u>8.</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	<u>9.</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	<u>10.</u>	\$ _____	\$ _____	\$ _____
<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>800.00</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ <u>800.00</u>

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

Name of Candidate or Committee
PHIL HART

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
<u>5/3/06</u>	<u>1. USPS ODA 110 83814</u>	<u>\$ 95.24</u>	\$
Purpose of Above Expenditure: <u>POSTAGE</u>			
<u>5/4/06</u>	<u>2. TOM HOEFLING 280 W. PRAIRIE AVE #4 COEUR D'ALENE, ID 83815</u>	<u>\$ 600.00</u>	\$
Purpose of Above Expenditure: <u>CAMPAIGN MGR</u>			
<u>5/5/06</u>	<u>3. DATABASE MARKETING PO BOX 642 COEUR D'ALENE, ID 83816</u>	<u>\$ 345.45</u>	\$
Purpose of Above Expenditure: <u>MAIL HOUSE</u>			
<u>4/25/06</u>	<u>4. NICKEL'S WORTH 107 N. 5TH ST ODA, ID 83816</u>	<u>\$ 70.00</u>	\$
Purpose of Above Expenditure: <u>CHECK PRINTING</u>			
<u>4/25/06</u>	<u>5. NICKEL'S WORTH 107 N. 5TH ST ODA, ID 83816</u>	<u>\$ 180.00</u>	\$
Purpose of Above Expenditure: <u>AD SPACE</u>			
<u> / / </u>	<u>6.</u>	\$	\$
Purpose of Above Expenditure:			
<u> / / </u>	<u>7.</u>	\$	\$
Purpose of Above Expenditure:			
<u> / / </u>	<u>8.</u>	\$	\$
Purpose of Above Expenditure:			
<u> / / </u>	<u>9.</u>	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		<u>\$ 1290.69</u>	\$
Total This Page (add columns A & B)			<u>\$ 1290.69</u>

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

Name of Candidate or Committee
PHIL HART

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
2/14/06	1. MALLAURCOTT DESIGN 6606 E. SELTICE WAY POST FALLS, ID 83854	\$ 470.00	\$
Purpose of Above Expenditure: AD DESIGN			
4/18/06	2. ADVANCED PRINTING 6606 E. SELTICE WAY POST FALLS, ID 83854	\$ 787.50	\$
Purpose of Above Expenditure: PRINTING			
4/19/06	3. TOM HOEFLING 280 W. PRAIRIE AVE #4 COEUR D'ALENE, ID 83815	\$ 600.00	\$
Purpose of Above Expenditure: CAMPAIGN MGR			
4/24/06	4. CDA PRESS PO BOX 7000 COEUR D'ALENE, ID 83816	\$ 800.50	\$
Purpose of Above Expenditure: AD SPACE			
4/27/06	5. MALLAURCOTT DESIGN 6606 E. SELTICE WAY POST FALLS, ID 83854	\$ 692.69	\$
Purpose of Above Expenditure: AD DESIGN			
4/26/06	6. CDA PRESS PO BOX 7000 COEUR D'ALENE, ID 83816	\$ 175.00	\$
Purpose of Above Expenditure: AD SPACE			
4/28/06	7. TOM HOEFLING 280 W. PRAIRIE AVE #4 COEUR D'ALENE, ID 83815	\$ 600.00	\$
Purpose of Above Expenditure: CAMPAIGN MGR			
4/29/06	8. THE SENIOR GAZETTE PO BOX 3460 POST FALLS, ID 83877	\$ 260.00	\$
Purpose of Above Expenditure: AD SPACE			
4/30/06	9. NICKEL'S WORTH 107 N. 5 TH ST COEUR D'ALENE, ID 83816	\$ 250.00	\$
Purpose of Above Expenditure: AD SPACE			
Subtotals of Columns A & B		\$ 4635.69	\$
Total This Page (add columns A & B)			\$ 4635.69

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

Name of Candidate or Committee PHIL HART	Report Covering the Period From 1/1/06 to 5/7/06
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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 0	Total Amount \$ 0
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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 or Creditor	Purpose of Expenditure
1. PHIL HART 4430 E. SARAH LOOP, ATHOL 83801	LOAN
Outstanding Balance beginning this period.. \$ <u>7774.37</u> Amount Incurred this period..... \$ <u>0</u> Payment this period..... \$ <u>0</u> Outstanding Balance..... \$ <u>7774.37</u>	Date Incurred <u>1-1-05/12-31-05</u> Date of Payment _____
2.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Payment this period..... \$ _____ Outstanding Balance..... \$ _____	Date Incurred _____ Date of Payment _____
3.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Payment this period..... \$ _____ Outstanding Balance..... \$ _____	Date Incurred _____ Date of Payment _____
4.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Payment this period..... \$ _____ Outstanding Balance..... \$ _____	Date Incurred _____ Date of Payment _____
5.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Payment this period..... \$ _____ Outstanding Balance..... \$ _____	Date Incurred _____ Date of Payment _____

Totals of this Page

Line 2: Amount Incurred This Period (Carry forward to Page 2, Under Incurred Expenditures)	\$ <u>0</u>
Line 3: Payment This Period (Carry forward to Page 2, under Expenditures and Incurred Expenditures)	\$ <u>0</u>