



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

**Section I**

|  |   |   |                                |
|--|---|---|--------------------------------|
| Name of Candidate or Political Committee and Chairperson<br><u>Denton Darrington</u> |   | Office Sought (if candidate)<br><u>State Senate</u> | District (if any)<br><u>27</u> |
| Mailing Address<br><u>3025 Hwy 77</u>  | <input type="checkbox"/> Check if address change. | City and Zip<br><u>Declo 83323</u>                  | Home Phone<br><u>654-2712</u>  |
| Name of Political Treasurer<br><u>Virgene Darrington</u>                             |   |   |                                |
| Mailing Address<br><u>3025 Hwy 77</u>  | <input type="checkbox"/> Check if address change. | City and Zip<br><u>Declo 83323</u>                  | Home Phone<br><u>654-2712</u>  |

MAY -9 AM 8:3  
SECRETARY OF STATE  
STATE OF OHIO

**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 1 / 1 / 06 through 5 / 7 / 06

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> 7 Day Pre-Primary Report            | <input type="checkbox"/> 30 Day Post-Primary Report | <input 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<br>This Period | COLUMN II<br>Calendar Year to Date |
|---|-------------------------|------------------------------------|
| Line 1: Cash on Hand January 1, This Year*                              | \$ <u>XXXXXX</u>        | \$ <u>3022.78</u>                  |
| Line 2: Enter Cash Balance at Close of Last Reporting Period**          | \$ <u>3022.78</u>       | \$ <u>XXXXXX</u>                   |
| Line 3: Total Contributions (Enter amount from page 2)                  | \$ <u>1600.00</u>       | \$ <u>1600.00</u>                  |
| Line 4: Subtotal (Add lines 1, 2 and 3)                                 | \$ <u>4622.78</u>       | \$ <u>4622.78</u>                  |
| Line 5: Total Expenditures (Enter amount from page 2)                   | \$ <u>1346.65</u>       | \$ <u>1346.65</u>                  |
| Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** | \$ <u>3276.13</u>       | \$ <u>3276.13</u>                  |
| Line 7: Outstanding Debt to Date  | \$ <u>_____</u>         |                                    |

\*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 Virgene Darrington, (name of Political Treasurer) hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Virgene Darrington  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

|  |   |
|--|---|
| Name of Candidate or Committee<br><span style="font-size: 1.2em; font-family: cursive;">Darrington for Senate</span> | Report Covering the Period<br>From <span style="font-size: 1.2em; font-family: cursive;">1/1/06</span> to <span style="font-size: 1.2em; font-family: cursive;">5/7/06</span> |
|--|---|

|  |                             |
|--|-----------------------------|
| <b>UNITEMIZED CONTRIBUTIONS</b>                              |                             |
| Contributions of Fifty Dollars (\$50.00) or Less This Period |                             |
| Total Number <u>    </u>                                     | Total Amount \$ <u>    </u> |

|   |                              |
|---|------------------------------|
| <b>UNITEMIZED EXPENDITURES</b>                                      |                              |
| Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period |                              |
| Total Number <u>  4  </u>   | Total Amount \$ <u>74.00</u> |

|   | Total This Period |
|---|-------------------|
| <u>  1  </u> Number of Schedule A pages Attached  |                   |
| <b>Contributions</b>  |                   |
| Unitemized Contributions (\$50 and less) from top of page                                   | \$ <u>    </u>    |
| Itemized Contributions (total all Schedule A sheets)  | \$ <u>1600.00</u> |
| Total Contributions (also enter this figure on page 1, Section IV, line 3)                  | \$ <u>1600.00</u> |
| <u>  2  </u> Number of Schedule B pages Attached  |                   |
| <b>Expenditures</b>   |                   |
| Unitemized Expenditures (less than \$25) from top of page                                   | \$ <u>74.00</u>   |
| Itemized Expenditures (total all Schedule B sheets)   | \$ <u>1272.65</u> |
| Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)    | \$ <u>    </u>    |
| Total Expenditures (also enter this figure on page 1, Section IV, line 5)                   | \$ <u>1346.65</u> |
| <u>    </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) | \$ <u>    </u>    |
| Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)        | + \$ <u>    </u>  |
| Subtotal  | = \$ <u>    </u>  |
| Payment this Period (Total all C-2Bs - Payment this Period)                                 | - \$ <u>    </u>  |
| Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)     | = \$ <u>    </u>  |
| <u>    </u> Number of Schedule C-2A pages Attached  |                   |
| <b>Pledged Contributions</b>  |                   |
| Amount Pledged this Period  | \$ <u>    </u>    |

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

Name of Candidate or Committee  
Darrington for Senate

|   |  | 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                             |
| <u>1/3/06</u>   | 1. <u>Id. Cable Telecommunications</u><br><u>Box 1145</u><br><u>Boise, Idaho 83701</u> | \$ <u>300.00</u>                          | \$ _____                          | \$ _____                          |
| <input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General |  | \$ <u>300.00</u><br>Calendar Year To Date | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year To Date |
| <u>2/4/06</u>   | 2. <u>Sanofi - Aventis</u><br><u>Box 6944</u><br><u>Bridgewater, N.J. 08807</u>        | \$ <u>500.00</u>                          | \$ _____                          | \$ _____                          |
| <input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General |  | \$ <u>500.00</u><br>Calendar Year To Date | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year To Date |
| <u>4/12/06</u>  | 3. <u>Id. Dental PAC</u><br><u>1220 W. Hays</u><br><u>Boise, Id 83702</u>              | \$ <u>250.00</u>                          | \$ _____                          | \$ _____                          |
| <input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General |  | \$ <u>250.00</u><br>Calendar Year To Date | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year To Date |
| <u>4/23/06</u>  | 4. <u>Assoc. General Contractors</u><br><u>Box 7386</u><br><u>Boise, Id 83707</u>      | \$ <u>250.00</u>                          | \$ _____                          | \$ _____                          |
| <input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General |  | \$ <u>250.00</u><br>Calendar Year To Date | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year to Date |
| <u>5/6/06</u>   | 5. <u>Coeur d Alene Tribe</u><br><u>Box 408</u><br><u>Plummer, Id 83851</u>            | \$ <u>300.00</u>                          | \$ _____                          | \$ _____                          |
| <input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General |  | \$ <u>300.00</u><br>Calendar Year To Date | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year To Date |
| <u>   /   /   </u>  | 6.   | \$ _____                                  | \$ _____                          | \$ _____                          |
| <input type="checkbox"/> Primary<br><input type="checkbox"/> General            |  | \$ _____<br>Calendar Year To Date         | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year To Date |
| <u>   /   /   </u>  | 7.   | \$ _____                                  | \$ _____                          | \$ _____                          |
| <input type="checkbox"/> Primary<br><input type="checkbox"/> General            |  | \$ _____<br>Calendar Year To Date         | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year to Date |
| <u>   /   /   </u>  | 8.   | \$ _____                                  | \$ _____                          | \$ _____                          |
| <input type="checkbox"/> Primary<br><input type="checkbox"/> General            |  | \$ _____<br>Calendar Year To Date         | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year To Date |
| <u>   /   /   </u>  | 9.   | \$ _____                                  | \$ _____                          | \$ _____                          |
| <input type="checkbox"/> Primary<br><input type="checkbox"/> General            |  | \$ _____<br>Calendar Year To Date         | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year to Date |
| <u>   /   /   </u>  | 10.  | \$ _____                                  | \$ _____                          | \$ _____                          |
| <input type="checkbox"/> Primary<br><input type="checkbox"/> General            |  | \$ _____<br>Calendar Year To Date         | \$ _____<br>Calendar Year To Date | \$ _____<br>Calendar Year To Date |
| Subtotals of Columns A, B & C   |  | \$ <u>1600.00</u>                         | \$ _____                          | \$ _____                          |
| Total This Page (add columns A, B & C)  |  |   |                                   | \$ <u>1600.00</u>                 |

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

Name of Candidate or Committee  
Darrington for Senate

|   |  | Column A        | Column B               |
|---|--|-----------------|------------------------|
| Date  | Full Name, Mailing Address and Zip Code of Recipient               | Cash or Check   | In-Kind (non-monetary) |
| <u>3/25/06</u>  | <u>1. US Cellular<br/>4700 S. Garnett Rd.<br/>Tulsa, OK 74146</u>  | <u>\$67.71</u>  | \$ _____               |
| Purpose of Above Expenditure: <u>Cellular Service</u> |  |                 |                        |
| <u>4/14/06</u>  | <u>2. US Cellular<br/>4700 S. Garnett Rd.<br/>Tulsa, OK 74146</u>  | <u>\$67.84</u>  | \$ _____               |
| Purpose of Above Expenditure: <u>Cellular Service</u> |  |                 |                        |
| <u>4/25/06</u>  | <u>3. Burley H.S. FFA<br/>#1 Bobcat Blvd.<br/>Burley, Id 83318</u> | <u>\$150.00</u> | \$ _____               |
| Purpose of Above Expenditure: <u>Contribution</u>     |  |                 |                        |
| <u>5/6/06</u>   | <u>4. US Cellular<br/>4700 S. Garnett Rd.<br/>Tulsa, OK 74146</u>  | <u>\$67.82</u>  | \$ _____               |
| Purpose of Above Expenditure: <u>Cellular Service</u> |  |                 |                        |
| <u>   /   /   </u>                                    | <u>5.</u>  | \$ _____        | \$ _____               |
| Purpose of Above Expenditure:                         |  |                 |                        |
| <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>\$353.87</u> | \$ _____               |
| Total This Page (add columns A & B)                   |  |                 | <u>\$353.87</u>        |

**SCHEDULE B  
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee  
Darrington for Senate

|   |   | Column A         | Column B               |
|---|---|------------------|------------------------|
| Date  | Full Name, Mailing Address and Zip Code of Recipient  | Cash or Check    | In-Kind (non-monetary) |
| <u>1/13/06</u>  | <u>1. Mini Cassia Chamber of Commerce<br/>Box 640<br/>Heyburn, Id 83336</u>                       | \$ <u>183.00</u> | \$ _____               |
| Purpose of Above Expenditure: <u>Membership</u>       |   |                  |                        |
| <u>1/17/06</u>  | <u>2. US Cellular<br/>4700 S. Garnett Rd.<br/>Tulsa, Ok 74146</u>                                 | \$ <u>88.57</u>  | \$ _____               |
| Purpose of Above Expenditure: <u>Cellular Service</u> |   |                  |                        |
| <u>1/28/06</u>  | <u>3. Family Readiness<br/>1842 Oakley, Ave<br/>Burley, Id 83318</u>                              | \$ <u>50.00</u>  | \$ _____               |
| Purpose of Above Expenditure: <u>Contribution</u>     |   |                  |                        |
| <u>2/15/06</u>  | <u>4. Id. Republican State Central Committee<br/>Box 2267<br/>Boise, Idaho 83701</u>              | \$ <u>100.00</u> | \$ _____               |
| Purpose of Above Expenditure: <u>Contribution</u>     |   |                  |                        |
| <u>2/15/06</u>  | <u>5. Americal Leg. Exchange Council<br/>1129 20th St. N.W. Suite 500<br/>Wash. D.C. 20036</u>    | \$ <u>50.00</u>  | \$ _____               |
| Purpose of Above Expenditure: <u>Membership</u>       |   |                  |                        |
| <u>2/11/06</u>  | <u>6. Scott Beck Volleyball Benefit<br/>840 W. 200 S.<br/>Burley, Id 83318</u>                    | \$ <u>100.00</u> | \$ _____               |
| Purpose of Above Expenditure: <u>Contribution</u>     |   |                  |                        |
| <u>2/12/06</u>  | <u>7. US Cellular<br/>4700 S. Garnett Rd.<br/>Tulsa, Ok 74146</u>                                 | \$ <u>67.71</u>  | \$ _____               |
| Purpose of Above Expenditure: <u>Cellular Service</u> |   |                  |                        |
| <u>2/25/06</u>  | <u>8. Cassia Rep. Central Committee<br/>c/o Dennis Dexter<br/>2652 Brantwood Burley, Id 83318</u> | \$ <u>80.00</u>  | \$ _____               |
| Purpose of Above Expenditure: <u>Contribution</u>     |   |                  |                        |
| <u>3/13/06</u>  | <u>9. Otter for Gov.<br/>Box 1456<br/>Boise, Id 83701</u>   | \$ <u>200.00</u> | \$ _____               |
| Purpose of Above Expenditure: <u>Contribution</u>     |   |                  |                        |
| Subtotals of Columns A & B                            |   | \$ <u>919.28</u> | \$ _____               |
| Total This Page (add columns A & B)                   |   |                  | \$ <u>919.28</u>       |