C-2 Rev. 06/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section I					
Name of Candidate or Political Com	mittee and Chairperson			Office Sought (if candid	auti Al Pistuge (ipany)2: L7
Like Prang Mailing Address	و			State Senat	07 35
Mailing Address	Check if address change.	City and Zip	0-1.1.6	Home Phone	Work Phone
Box 652		Salmon	83467	756,237	7.1303.0033
Name of Political Treasurer					SIMIE CE IDAHO
Bernadine B Mailing Address	crry				
		City and Zip		Home Phone	Work Phone
24 Dogwood 1	-anc	Sal mon 9	3467	756.2880	33
Section II					None
Directions: To indicate the tinstructional manual for report		tes.	riate dates an		
7 Day Pre-Primary	Report	30 Day Post-Prim	ary Report	☐ October	10 Pre-General Report
☐ 7 Day Pre-General	Report	30 Day Post-Gene	eral Report	☐ Annual	Report
☐ Semi-Annual Repor	rt (Statewide Candidates	Only)			
Is this Report an	amendment?	□ No	Is this a Terr	mination Report?	☐ Yes ☐ No
Section III	STATEMENT OF N	NO CONTRIBU	TIONS OR I	EXPENDITURES	
Section IV. I hereby certify the	nat I have received no confrom/				nis reporting period
Section IV		SUMMA			
To reach your Calendar Year figures to the Column II figures				COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand Janua	ry 1, This Year*		\$ _ 2	XXXXXX_	\$
Line 2: Enter Cash Balance	•	g Period**	\$	XXX	\$ XXXXXX
Line 3: Total Contributions		-	\$	899.00	\$ 899.00
Line 4: Subtotal (Add lines		,	\$	899.00	\$ 899,00
Line 5: Total Expenditures (2)	\$	411.70	\$ 421,70
Line 6: Cash Balance at Clo			* \$	477.30	\$ 477.30
Line 7: Outstanding Debt to	Date		\$		
*This same figure should be **You must report the cash Note that the closing cash b	on hand at both the begir	nning of the repor	ting period ar		
	Section V		CERTIFIC	ATION	
Return This Report To: Ben Ysursa	1 Bex	nadine	Berry	herehy o	ertify that the information
Secretary of State		(name of Political T	reasurer)		•
	in this repor	t is a true, comple	ere and correc	a Campaign Financia	l Disclosure Report as

Signature of Political Treasurer

required by law.

Boise ID 83720-0080 phone: (208) 334-2852 fax: (208) 334-2282

DETAILED SUMMARY PAGE

Name of Candidate or Committee
LUKe Prange

Report Covering the Period
From Jan/ 1 /06 to May/ 7 /06

UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 12 Total **399.00**

UNITEMIZED EXPENDITURES

Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total	Li	Total	~~ ~~
Number		Amount \$	50.95

		Total This Period
Contributions		
Unitemized Contributions (\$50 and less) from top of page	\$	399.00
Itemized Contributions (total all Schedule A sheets)	\$	500.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$	899,00
Expenditures		
Unitemized Expenditures (less than \$25) from top of page	\$	50.95
Itemized Expenditures (total all Schedule B sheets)	\$	370.75
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$	
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$	421,70
Number of Schedule C-2B pages Attached		
Incurred Expenditures		
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$	
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$	
Subtotal	= \$	
Payment this Period (Total all C-2Bs - Payment this Period)	- \$	7
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$	
Number of Schedule C-2A pages Attached		0
Pledged Contributions		
Amount Pledged this Period	\$	

SCHEDULE A ITEMIZED CONTRIBUTIONS

Page	of
1.1	' 1

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

Name of Ca	andidate	or Committ	ee
Au	Kc	Pra	nge

		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
4,1,06	Robert Blackadar 10 N. Cherokee Rd	s_100,00	\$	\$
Primary General	Salmon, ID 83467	\$ 100.00 Calendar Year To Date	\$Calendar Year To Date	\$ Calendar Year to Date
4,24,06	2 Robert Blackadar	\$ 100,00	\$	\$
Primary General	10 N. Cherokee Rd Salmon, ID 83467	\$ 200,00 Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date
4 124106	3 Nan Bryant PO Box 1170	\$ /00,00	\$	\$
Primary General	Salmon, ID 83467	\$	\$Calendar Year To Date	\$Calendar Year to Date
4,18,06	4. Rath Waterhury	\$ 200,00	\$	\$
Primary General	Salmon, ID 83467	\$	\$Calendar Year To Date	\$Calendar Year to Date
//	5.	\$	\$	\$
☐ Primary ☐ General		\$Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date
//	6.	\$	\$	\$
☐ Primary ☐ General		\$Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date
//	7.	\$	\$	\$
☐ Primary ☐ General		\$Calendar Year To Date	\$ Calendar Year To Date	\$Calendar Year to Date
//	8.	\$	\$	\$
☐ Primary ☐ General		\$Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date
	9.	\$	\$	\$
☐ Primary ☐ General	10.	\$Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date
//	10.	\$	\$	\$
☐ Primary ☐ General		\$Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date
	Subtotals of Columns A, B & C	\$ 500,00	\$	\$
	Total This Page (add columns A, B & C)	500,00		\$

SCHEDULE B ITEMIZED EXPENDITURES

Page of

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

Name of Candidate or Committee
Luke Prange

	,	Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
3,20,06	Bernadine Berry 24 Dogwood Lane Salmon, ID 83467	s <u>25700</u>	\$
Purpose of Abo	ve Expenditure: Reimbursement of PO Box	Rental	
4,4,06	ve Expenditure: Reimburscment of PO Box 2 Idano Democratic Party PO Box 445 Boise, ID 83701	\$250,00	\$
	ve Expenditure: VAN Access Fcc		
	3. Luke Prange 602 12th St. Salmon, ID 83467	s 25,00	\$
Purpose of Abo	ve Expenditure: mileage-Challis-m+g Id, Dem.	100mi @ .25	-
4,24,00	Luke Prange 602 lath St Salmon, ID 83467	s 70,75	
	ve Expenditure: mileage - Rigby -mtq IEA - 2	83 m', Q, 25	
	5.	\$	\$
Purpose of Abo	ve Expenditure:		
	6.	\$	\$
Purpose of Abo	ve Expenditure:	•	
1 1	7.	\$	\$
Purpose of Abo	ve Expenditure:		
	8.	\$	\$
Purpose of Abo	ve Expenditure:		
	9.	\$	\$
Purpose of Abo	ve Expenditure:		
	Subtotals of Columns A & B	\$370,75	\$
	Total This Page (add columns A & B)		\$370,75

SCHEDULE C-2A CONTRIBUTIONS PLEDGED BUT NOT YET RECEIVED

Name of Candidate	e or Committee		Report Covering the Per	
	, goods or services of	you were promised and agreed to accept a contribution of offered before the end of the reporting period. Do not in	during this reporting period	but have not actually
Line 1: Pledged (Contributions of \$5	0.00 or Less This Period: Total Number	Total Amount \$	
Pledged Contribu	itions of More Tha	n \$50.00 This Period:		
Pledge For	Date of Pledge	Full Name, Mailing Address and Z of Contributor/Lender	ip Code	Amount Pledged
☐ Primary ☐ General	/	1.		
☐ Primary ☐ General		2.		
☐ Primary ☐ General		3.		
☐ Primary ☐ General	/	4.		
☐ Primary ☐ General	/	5. (O)		
☐ Primary ☐ General		6.		
☐ Primary ☐ General	//	7.		
☐ Primary ☐ General		8.		
☐ Primary ☐ General		9.		
☐ Primary ☐ General		10.		
☐ Primary ☐ General		11.		
Line 3: Total Amo	ount of Pledged Con	tributions of More Than \$50.00 tributions of \$50.00 or Less (enter amount from line 1) tributions this Period (add lines 2 and 3) Also enter this	total on page 2	\$ \$ \$

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

Name of Candidate or Committee	Report Covering the Period From/
Directions: Complete this schedule if you incurred an obligation during this reporting the control of the con	ng period to purchase an item or service or made a payment on
Line 1: Incurred Expenditures of Less Than \$25.00 This Period: Total Nu	mber Total Amount \$
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.	
Outstanding Balance beginning this period \$	_
Amount Incurred this period\$	Date Incurred
Payment this period\$	Date of Payment
Outstanding Balance\$	_
2.	
Outstanding Balance beginning this period\$	
Amount Incurred this period\$	Date Incurred
Payment this period\$	Date of Payment
Outstanding Balance\$	_
()	
Outstanding Balance beginning this period\$ Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$	Date Incurred Date of Payment
Amount Incurred this period\$	
Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$	Date of Payment
Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$ 4. Outstanding Balance beginning this period\$ Amount Incurred this period\$	Date of Payment
Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$ 4. Outstanding Balance beginning this period\$ Amount Incurred this period\$ Payment this period\$	Date of Payment Date Incurred Date of Payment
Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$ 4. Outstanding Balance beginning this period\$ Amount Incurred this period\$	Date of Payment Date Incurred Date of Payment
Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$ 4. Outstanding Balance beginning this period\$ Amount Incurred this period\$ Payment this period\$	Date of Payment Date Incurred Date of Payment
Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$ Outstanding Balance beginning this period\$ Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$ Outstanding Balance\$	Date of Payment Date Incurred Date of Payment
Amount Incurred this period	Date of Payment Date Incurred Date of Payment Date Incurred
Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$ 4. Outstanding Balance beginning this period\$ Amount Incurred this period\$ Payment this period\$ Outstanding Balance\$ Outstanding Balance\$ Outstanding Balance\$ Outstanding Balance\$	Date Incurred Date Incurred Date of Payment Date Incurred Date Incurred Date of Payment