

fax: (208) 334-2282

CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

(Please Print or Type)

Section 1	y .	, ,,,,,,,				
Name of Candidate or Political Cut	unduce and Chaleperson		05 MAY -9	Office Sought III condidate	District (if any)	
JAMES C. MORFITT				DISTRICT JUDGE	THIRD	
Muiling Address	☐ Check if addess change.	City and Zip		Home Phrase (208)	Work Phone (20B)	
P. O. Box 401		Caldwell	83606	45951365	454-7371	
Nume of Pollucal Treasurer						
JAMES C. MORFTTT Mailing Address	Check if address change.	City and Zip		U.m. Ukara (200)	West filtress (DOC)	
P. O. Box 401		Caldwell	83606	Home Phane (208) 459–1365	Wurk Phone (208) 454-7371	
Section II		Calumena	03000	439-1303	404-1211	
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 Max / 06 / 2006 through Max / 07 / 2006.						
7 Day Pre-Primary	Report	30 Duy Post-Pri	тшу Кероп	October 10	Pre-General Report	
☐ 7 Day Pre-General Report ☐ 30 Day Post-General Report ☐ Annual Report						
Scmi-Annual Report (Statewide Cundidutes Only)						
Is this Report ar	amendment?	₩ No	Is this a Tern	ninution Report?	Yes 🔯 No	
Section III	STATEMENT OF I	O CONTRIB	UTIONS OR E	XPENDITURES		
the appropriate dates and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II. Section IV. XVI I hereby certify that I have received no contributions and have made no expenditures during this reporting period from Mar. / 05 / 2006 through May / 07 / 2006.						
Section IV SUMMARY						
To reach your Calendar Year to Date figure: Add this report's Column 1 figures to the Column II figures of your previous report (except on line 6).				OLUMN I his Period Ca	COLUMN II lendar Year to Date	
Line 1: Cash on Hand Junua	mr 1 Thic Venr#		s_>	XXXXXX_ s	0_00	
	• \$	\$	XXXXXX			
Line 2: Enter Cash Balance at Close of Last Reporting Period** Line 3: Total Contributions (Enter amount from page 2) \$				0.00 s	0-00	
Line 4: Subtotal (Add lines 1, 2 and 3) \$ 0.00 \$ 0.00						
Line 5: Total Expenditures (Enter amount from page 2) \$ 0.00 \$ 0.00						
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** \$ 0.00 \$ 0.00						
Line 7: Outstanding Debt to Date			s	0_00_		
*This same figure should be entered on line 1 of all reports filed this calendar year.						
**You must report the eash 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.						
	Section V	`	CERTIFICA	ATION		
Return This Report To:						
Ben Ysursa	1 Jam	es C. Morfi		, hereby certi	fy that the information	
Secretary of State						
PO Box 83720 Boise ID 83720-0080				·	en—e – mari ar is an le arra ana.	
phone: (208) 334-2852	required by	iaw.		. 1		

Signature of Political Treasures