C-2 Rev. 06/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE

(Please Print or Type)

Section I	SCANNED				
Name of Candidate or Political Committee and Chairperson		Office Sought (in dan	didate) District (if any)		
American Ins. Assoc PA	1C-1DAHO		DE STATE		
Mailing Address Check if address chang	e. City and Zip 83	Home Phone STATE	OF 1371-8484		
Name of Political Treasurer PHILLIP M. BARI	SER				
Mailing Address	City und Zip	Home Phone	Work Phone		
Section II	-usuppose - usc				
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/_///					
7 Day Pre-Primary Report	30 Day Post-Primary Rep	port Octob	er 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?	Yes No Is this	a Termination Report?	Yes No		
Section III STATEMENT O	F 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.					
from/_		/			
Section IV	SUMMARY				
To reach your Calendar Year to Date figure: Add figures to the Column II figures of your previous	this report's Column I	COLUMN I This Period	COLUMN II Calendar Year to Date		
Line 1: Cash on Hand January 1, This Year* Line 2: Enter Cash Balance at Close of Last Repo Line 3: Total Contributions (Enter amount from pa Line 4: Subtotal (Add lines 1, 2 and 3) Line 5: Total Expenditures (Enter amount from pa Line 6: Cash Balance at Close of Period (Subtract Line 7: Outstanding Debt to Date	ge 2)	\$ XXXXXX \$ 818.55 \$ 150.00 \$ 150.00 \$ 667.55	\$ 818.55 \$ XXXXXX \$ 150.00 \$ 667.55		
*This same figure should be entered on line 1 of a	all reports filed this calendar	year.			

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

DARBER 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

^{**}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.

DETAILED SUMMARY PAGE

Name of Candidate or Committee

A Merican Insurance Assner Assner Report Covering the Period From 01/01/06 to 05/16/06

UNITEMIZED CONTRIBUTIONS

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

Total Number Total Amount \$____

UNITEMIZED EXPENDITURES

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

Total Number Total Amount \$_____

	Total This Period
Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$
Itemized Contributions (total all Schedule A sheets)	\$
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$
Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$ 150,00
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)	\$ 150,00 \$ 150,00
Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 318.55
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+\$ 15
Subtotal	= \$
Payment this Period (Total all C-2Bs - Payment this Period)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$
Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$

SCHEDULE B ITEMIZED EXPENDITURES

Page of

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

Name of Candidate or Committee American Ins Assn PAC IDAHO				
	Column A	Column B		
Full Name, Mailing Address and Zip Code Oate Of Recipient	Cash or Check	In-Kind (non-monetary)		
Date of Recipient 1.25,06 Date OF Recipient OF Recipient OF Recipient OF Recipient OF Recipient	\$ 150.00	\$		
Purpose of Above Expenditure: Campaign (cution				
	\$	\$		
Purpose of Above Expenditure:				
3.	\$	\$		
D		T		
Purpose of Above Expenditure: 4.				
	\$	\$		
Purpose of Above Expenditure:				
5.				
	\$	\$		
Purpose of Above Expenditure:				
6.				
	\$	\$		
Purpose of Above Expenditure:				
	\$	\$		
D CAL D I'd				
Purpose of Above Expenditure: 8.				
	\$	\$		
Purpose of Above Expenditure:	L			
9.				
	\$	\$		
Purpose of Above Expenditure:				
Subtotals of Columns A & B	\$ 150.00	<u>\$</u>		
Total This Page (add columns A & B)		\$ 150.00		