



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE
(Please Print or Type)

C-2
Rev. 10/07

08 DEC -1 PM 2:10

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson, Office Sought, District, Mailing Address, City and Zip, Home Phone, Work Phone, and Name of Political Treasurer.

Change of address for: Candidate or Political Committee [] Political Treasurer []

Section II

TYPE OF REPORT

This filing is an: [X] Original [] Amendment

This report is for the period from ___/___/___ through ___/___/___.

- Report type options: 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 a Termination Report: [X] 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 and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

[X] I hereby certify that I have received no contributions and have made no expenditures during this reporting period.

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: Line Item, COLUMN I This Period, and COLUMN II Calendar Year to Date. Includes entries for Cash on Hand, Beginning Cash Balance, Contributions, Subtotal, Expenditures, Ending Cash Balance, and Outstanding Debt.

*This same figure should be entered on line 1 of all reports filed this calendar year.

**This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.

Note: The closing cash balance for the current reporting period appears on the next report as the beginning cash on hand.

Section V

Return This Report To: Ben Yursa, Secretary of State, PO Box 83720, Boise ID 83720-0080, Phone: (208) 334-2852, Fax: (208) 334-2282

I, G. RUSTYN CASIANO, 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

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

Name of Candidate or Committee: G. RUSTEN CASIANO

Date Received	Full Name, Mailing Address and Zip Code of Contributor	Cash or Check
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	1. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	2. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	3. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	4. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	5. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	6. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	7. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	8. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	9. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	10. _____ _____ _____	\$ _____ \$ _____ Calendar Year-To-Date
Total This Page:		\$ <u>00.00</u>

Transfer the combined total of all Schedule A pages to the Detailed Summary on page 2 line 2.

SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee: G. RUSTYN CASIANO

Purpose Codes

- | | |
|---|--|
| <p>A All Travel Expenses (Airfare, Fuel, Lodging & Mileage)</p> <p>B Broadcast Advertising (Radio, TV & Internet)</p> <p>C Contributions to Candidates & PAC's</p> <p>D Donations & Gifts</p> <p>E Event Expenses</p> <p>F Food & Refreshments</p> <p>G General Operational Expenses</p> <p>L Literature, Brochures, Printing</p> <p>M Management Services</p> | <p>N Newspaper & Other Periodical Advertising</p> <p>O Other Advertising (Yard Signs, Buttons, etc.)</p> <p>P Postage</p> <p>S Surveys & Polls</p> <p>T Tickets (Events)</p> <p>U Utilities</p> <p>W Wages, Salaries, Benefits & Bonuses</p> <p>Y Petition Circulators</p> <p>Z Preparation & Production of Advertising</p> |
|---|--|

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
12/01/08	1. AMERICAN REG CROSS OF GREATER BOISE 146 S. COLE RD BOISE, ID 83709	D	\$ 25.00
//_	2. _____		\$ - 0 -
//_	3. _____		\$ - 0 -
//_	4. _____		\$ - 0 -
//_	5. _____		\$ - 0 -
//_	6. _____		\$ - 0 -
//_	7. _____		\$ - 0 -
//_	8. _____		\$ - 0 -
//_	9. _____		\$ - 0 -
//_	10. _____		\$ - 0 -
Total This Page:			\$ 25.00

Transfer the combined total of all Schedule B pages to the Detailed Summary on page 2 line 7.