CAMPAIGN FINANCIAL DISCLOSURE REPOBEN 26 AM 8: 22



SUMMARY PAGE (Please Print or Type)

SECRETARY OF STATE STATE OF IDAHO

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| Section I | | OIMIL | CITOTIO | | | | |
|--|--|-------------------------|--|---------------------------------------|--|--|--|
| Name of Candidate or Political Committee and Chairperson Gail M. Hartnett | | State R | Office Sought (if candidate) State Representative District (if any) 18A | | | | |
| Mailing Address 3688 South Crosspoint Avenue | City and Zip Boise, ID 8370 | Home Phone 208 34 | 2 8220 | Work Phone 208 342 8220 | | | |
| Name of Political Treasurer Ronald J. Hartnett | | | | | | | |
| Mailing Address | City and Zip | Home Phone | | Work Phone | | | |
| 3688 South Crosspoint Avenue | Boise, ID 8370 | 06 208 34 | 12 8220 | 220 208 342 2833 | | | |
| Change of address for: Candidate or Political Committee Political Treasurer | | | | | | | |
| | TYPE OF REPORT | | | | | | |
| This report is for the period from 1/ /1 /2009 through 12 /31 /2009. | | | | | | | |
| 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report 7 Day Pre-General Report S Annual Report | | | | | | | |
| | | | | | | | |
| Is this a Termination Report: Yes | Only) No | | | | | | |
| Section III 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. 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). | | COLUMN I This Period | (| COLUMN II Calendar Year to Date | | | |
| Line 1: Cash on Hand January 1, This Calendar Year* | | \$ XXXXXX | \$ | 196.13 | | | |
| Line 2: Enter Beginning Cash Balance** | | \$196.13 | _ \$ | XXXXXX | | | |
| Line 3: Total Contributions (Enter amount from line 5, p. | age 2) | \$0.00 | _ \$ | 0.00 | | | |
| Line 4: Subtotal (Add lines 1, 2 and 3) | | \$196.13 | _ \$ | 196.13 | | | |
| Line 5: Total Expenditures (Enter amount from line 11, | page 2) | \$0.00 | \$ | 0.00 | | | |
| Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4) | | \$196.13 | \$ | 196.13 | | | |
| Line 7: Outstanding Debt to Date (Enter amount from lin | \$_300.00 | | | | | | |
| *This same figure should be entered on line 1 of all rep **This is the figure on line 6 of the last Campaign Finan Note: The closing cash balance for the current reportin | icial Disclosure Report filed. I | | | | | | |
| Section V | | | | | | | |
| Return This Report To: Ben Ysursa Secretary of State PO Box 83720 Boise ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282 | Ronald J. Hartnett Name of Political Treasurer ue, complete and correct Can | , nereby ce | | formation in this | | | |
| | Page 1 | Signature of Political | Treasurer | | | | |