P.1

C-2 Rev. 2/10

## CAMPAIGN FINANCIAL DISCLOSURE REPORT



SUMMARY PAGE (Please Print or Type)

|   | 12 FEB 13 AM II: 45                     |  |                                       |  |  |
|---|---|--|---------------------------------------|--|--|
| Section I   |   | Office Sought (If candidate)   District (If any) |                                       |  |  |
| Name of Candidate or Political Committee and Chairperson Concerned Businesses of North Idaho  |   | V V 1.   | Value in a diplif                     |  |  |
| Mailing Address   | City and Zip 8-3815                     | Home Phone A                                     |                                       |  |  |
| 2900 N. Gov'+ Way # 318   | Coeurd'Alone                            | 268 755 <del>3</del> 86                          | 39 308 783-3830                       |  |  |
| Name of Political Treasurer<br>La Donna Beaumont  |   |  |                                       |  |  |
| Mailing Address   | City and Zip &>\$15                     | Home Phone                                       | Work Phone                            |  |  |
| 2040 E Mountain Vista Dr.   | Coeurd'Alene                            | 20875538   | 729 208755 3829                       |  |  |
| Change of address for: Candidate or Political Commit  | tee D Political Treasu                  | urer 🏻   | · · · · · · · · · · · · · · · · · · · |  |  |
| Section II  | TYPE OF REPORT                          |  |                                       |  |  |
| This filing is an: 🗡 Original 🛘 Amendme   | · ·                                     |  |                                       |  |  |
| * *   | ough/                                   |  |                                       |  |  |
| 7 Day Pre-Primary Report 30 Day Post-Primary Report Cotober 10 Pre-General Report   |   |  |                                       |  |  |
| 7 Day Pre-General Report  | 0 Day Post-General Report               | Annual   | Report                                |  |  |
| ☐ Semi-Annual Report (Statewide Candidates Only)  |   | •  |                                       |  |  |
| Is this a Termination Report:   | ı                                       |  |                                       |  |  |
| Castion III STATEMENT OF  | NO CONTRIBUTIONS OR EX                  | YDENDITUDES                                      |                                       |  |  |
| Section III STATEMENT OF Directions: If you had no contributions or expenditures dur  |   |  | tement below and sign this report     |  |  |
| Be sure to carry forward the appro  | opnate "Calendar Year to Date"          | ' figures in Column II, S                        | ection IV.                            |  |  |
| i hereby certify that I have received no con  | ntributions and bave made no            | evnenditures during this                         | reporting period                      |  |  |
| Section IV  | SUMMARY                                 | experience outling the                           |                                       |  |  |
| Section IV To reach your Calendar Year to Date figure: Add this report  |   | COLUMNI  | COLUMNII                              |  |  |
| figures to the Column II figures of your previous report (exce  |   | This Period                                      | Calendar Year                         |  |  |
|   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |  | to Date                               |  |  |
| Line 1: Cash on Hand January 1, This Calendar Year*   | \$                                      | XXXXXX   | s 821.31                              |  |  |
| •   |   | 821.31   | s XXXXXX                              |  |  |
| Line 2: Enter Beginning Cash Balance**  |   | <u> </u>   | Y                                     |  |  |
| Line 3: Total Contributions (Enter amount from line 5, page 2   | 2) \$_                                  | 200.00   | s 060,00                              |  |  |
| Line 4: Subtotal (Add lines 1, 2 and 3)   |   | 821.31   | \$ 821.31                             |  |  |
| Line 5: Total Expenditures (Enter amount from line 11, page   | 2) \$_                                  | 240.00   | s 240.00                              |  |  |
| Line 6; Enter Ending Cash Balance (Subtract line 5 from line  | ÷ 4) \$_                                | 581.31   | s 581.31                              |  |  |
| Line 7: Outstanding Debt to Date (Enter amount from line 18   | 3, page 2) \$_                          | <u>Ø</u>   |                                       |  |  |
| *This same figure should be entered on line 1 of all reports f **This is the figure on line 6 of the last Campaign Financial I Note: The closing cash balance for the current reporting per | Disclosure Report filed. If this is     |  |                                       |  |  |
| Section V   | Too appears on the next report          | de the beginning each                            | on name.                              |  |  |
| Paturn This Panort To:  | •                                       |  |                                       |  |  |
| Ben Ysursa La Gon   | ina Beaumont                            | h h 4/8 - 4l                                     | - 4 Ab - 1-8                          |  |  |
| Secretary of State  | Name of Political Tressurer             | , nereby certify the                             | nat the Information In this           |  |  |
|   | omplete and correct Campaign            |  | eport as required by law.             |  |  |
| Phone: (200) 334-2852   | _                                       |  | -L no radenae et imili                |  |  |
| Fax: (208) 334-2282   | LaDona Be                               | au nont  |                                       |  |  |

Signature of Political Treasurer

## SCHEDULE B ITEMIZED EXPENDITURES

Page of

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

| The state of the s |  |   |              |               |  |  |  |
|--|--|---|--------------|---------------|--|--|--|
| Name of Candidate or Committee:  |  |   |              |               |  |  |  |
| Purpose Codes  |  |   |              |               |  |  |  |
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) N Newspaper & Other Periodical Advertising  |  |   |              |               |  |  |  |
| B Broadcast Advertising (Radio, TV & Internet)   | Other Advertising (Yard Signs, Buttons, etc.)        |   |              |               |  |  |  |
| C Contributions to Candidates & PAC's  | P  | Postage                                 |              |               |  |  |  |
| D Donations & Gifts  | S  | Surveys & Polis                         |              |               |  |  |  |
| E Event Expenses   | T  | Tickets (Events)                        |              |               |  |  |  |
| F Food & Refreshments  | U  | Utilities `                             |              |               |  |  |  |
| G General Operational Expenses   | W  | Wages, Salaries, Benefits & Bonuses     |              |               |  |  |  |
| L Literature, Brochures, Printing  | Υ  | Petition Circulators                    |              |               |  |  |  |
| M Management Services  | Z  | Preparation & Production of Advertising |              |               |  |  |  |
| Date Spent Full Name, Malling Address at   | Full Name, Malling Address and Zip Code of Recipient |   | Purpose Code | Cash or Check |  |  |  |
| 1. Inland Northurs<br>421 W. Rivers<br>505,0511 Spokane WA   | 1 ae   | 99201                                   | G            | \$ 20.00      |  |  |  |
| 06,05,11 2. Inland Northu<br>Spokane WA  | 125  | t Bank<br>Ave                           | G            | \$ 20.00      |  |  |  |
| 3. George Sayle<br>10.2.11 PO Box 3864   | ~  | for City Counci                         | 1            | . 100.00      |  |  |  |