



CAMPAIGN FINANCIAL DISCLOSURE REPORT
SUMMARY PAGE
(Please Print or Type)

C-2
Rev. 5/11

Section I

12 APR 2012 9:42

| | | | |
|--|--|--|----------------------------------|
| Name of Candidate or Political Committee and Chairperson <u>Jim DeAngelis</u> | | Office Sought (if candidate) <u>ID Representative</u> | District (if any) <u>3B</u> |
| Mailing Address <u>2983 Chaparral Dr -</u> | City and Zip <u>Idaho Falls 83404</u> | Home Phone <u>529-5851</u> | Work Phone <u>STATE IDAHO</u> |
| Name of Political Treasurer <u>Susan Mills</u> | | | |
| Mailing Address <u>311 N. Placer Ave -</u> | City and Zip <u>Idaho Falls 83402</u> | Home Phone <u>522-0378</u> | Work Phone |

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment

This report is for the period from 1/1/12 through 4/29/12

- 7 Day Pre-Primary Report
- 7 Day Pre-General Report
- Semi-Annual Report (Statewide Candidates Only)
- 30 Day Post-Primary Report
- 30 Day Post-General Report
- October 10 Pre-General Report
- Annual Report

Is this a Termination Report: 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.

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* | \$ <u>XXXXXX</u> | \$ _____ |
| Line 2: Enter Beginning Cash Balance** | \$ <u>0</u> | \$ <u>XXXXXX</u> |
| Line 3: Total Contributions (Enter amount from line 5, page 2) | \$ <u>1586.74</u> | \$ _____ |
| Line 4: Subtotal (Add lines 1, 2 and 3) | \$ <u>1586.74</u> | \$ _____ |
| Line 5: Total Expenditures (Enter amount from line 11, page 2) | \$ <u>171.43</u> | \$ _____ |
| Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4) | \$ <u>1415.31</u> | \$ _____ |
| Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) | \$ <u>0</u> | \$ _____ |

*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, Susan Mills, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Susan K. Mills
Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Jim DeAngelis

| | | Total This Period |
|----------------------|--|---------------------|
| Contributions | | |
| ① | Unitemized Contributions (\$50 and less) # of Contributors <u>3</u> | + \$ <u>90.00</u> |
| ② | Itemized Contributions (Total of all Schedule A sheets) | + \$ <u>1450.00</u> |
| ③ | In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets) | + \$ <u>46.74</u> |
| ④ | Loans (Total of all New Loan amounts from Schedule D sheets) | + \$ |
| ⑤ | Total Contributions (Transfer this figure to page 1, Section IV, Line 3) | = \$ <u>1586.74</u> |

| | | |
|---------------------|---|--------------------|
| Expenditures | | |
| ⑥ | Unitemized Expenditures (Less than \$25) # of Expenditures <u>1</u> | + \$ <u>6.89</u> |
| ⑦ | Itemized Expenditures (Total of all Schedule B sheets) | + \$ <u>117.80</u> |
| ⑧ | In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets) | + \$ <u>46.74</u> |
| ⑨ | Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets) | + \$ |
| ⑩ | Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets) | + \$ |
| ⑪ | Total Expenditures (Transfer this figure to page 1, Section IV, Line 5) | = \$ <u>171.43</u> |

| | | |
|-------------------------------------|---|------|
| Loans, Credit Cards and Debt | | |
| ⑫ | Outstanding Balance from previous reporting period | + \$ |
| ⑬ | New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets) | + \$ |
| ⑭ | New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets) | + \$ |
| ⑮ | Subtotal | = \$ |
| ⑯ | Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets) | - \$ |
| ⑰ | Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets) | - \$ |
| ⑱ | Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7) | = \$ |

| | | |
|------------------------------|---|------|
| Pledged Contributions | | |
| ⑲ | Unitemized Pledged Contributions (\$50 and less) # of Pledges _____ | + \$ |
| ⑳ | Itemized Pledged Contributions this Period (Total of all Schedule F sheets) | + \$ |
| ㉑ | Total Pledged Contributions this period | = \$ |

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

Name of Candidate or Committee: Jim DeAngelis

| Date Received | Full Name, Mailing Address and Zip Code of Contributor | Cash or Check |
|---|--|---|
| 3/13/12 | 1. J. E. McGimpsey 2122 Calkins Ave. Idaho Falls, ID 83402 | \$ 500.00 \$ 500.00 Calendar Year-To-Date |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | |
| 3/15/12 | 2. Countryside Veterinary Hospital 3120 Woodruff Idaho Falls, ID 83402 | \$ 250.00 \$ 250.00 Calendar Year-To-Date |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | |
| 3/22/12 | 3. Elenore Hampton 586 Safstrom Place Idaho Falls, ID 83401 | \$ 300.00 \$ 300.00 Calendar Year-To-Date |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | |
| 4/7/12 | 4. Jerry Shively 555 S. Belin Rd - Idaho Falls, ID 83402 | \$ 100.00 \$ 100.00 Calendar Year-To-Date |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| 4/13/12 | 5. James M. Francis 2810 Westmoreland Idaho Falls, ID 83402 | \$ 100.00 \$ 100.00 Calendar Year-To-Date |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| 4/14/12 | 6. D. G. Hill 2290 Hennyanna Idaho Falls, ID 83404 | \$ 200.00 \$ 200.00 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 |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | |
| Total This Page: | | \$ 1450.00 |

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: Jim DeAngelis

Purpose Codes

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

| Date Spent | Full Name, Mailing Address and Zip Code of Recipient | Purpose Code | Cash or Check |
|-------------------------|---|--------------|------------------|
| 3/13/12 | 1. At Credit Union 525 W. Sunnyside Rd - Idaho Falls, ID 83403-2871 | I | \$ 26.00 |
| 4/17/12 | 2. Zip Print 383 F Street Idaho Falls, ID 83402 | L | \$ 91.80 |
| _/_/12 | 3. | | \$ _____ |
| _/_/12 | 4. | | \$ _____ |
| _/_/12 | 5. | | \$ _____ |
| _/_/12 | 6. | | \$ _____ |
| _/_/12 | 7. | | \$ _____ |
| _/_/12 | 8. | | \$ _____ |
| _/_/12 | 9. | | \$ _____ |
| _/_/12 | 10. | | \$ _____ |
| Total This Page: | | | \$ 117.80 |

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

SCHEDULE C IN-KIND CONTRIBUTIONS and EXPENDITURES

Name of Candidate or Committee: Jim DeAngelis

Purpose Codes

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

| | | | |
|----|---|--|---|
| 1. | 4/1/12 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | Contributor Name, Mailing Address and Zip Code <u>Jim DeAngelis</u> <u>2983 Chaparral Dr -</u> <u>Idaho Falls, ID 83404</u> | \$ <u>46.74</u> \$ <u>46.74</u> Calendar Year-To-Date |
| | | Expenditure Name, Mailing Address and Zip Code <u>Bonneville County Elections office</u> <u>605 N. Capital Ave -</u> <u>Idaho Falls, ID 83402</u> | \$ <u>46.74</u> Purpose Code G |
| 2. | / / <input type="checkbox"/> Primary <input type="checkbox"/> General | Contributor Name, Mailing Address and Zip Code | \$ _____ \$ _____ Calendar Year-To-Date |
| | | Expenditure Name, Mailing Address and Zip Code | \$ _____ Purpose Code |
| 3. | / / <input type="checkbox"/> Primary <input type="checkbox"/> General | Contributor Name, Mailing Address and Zip Code | \$ _____ \$ _____ Calendar Year-To-Date |
| | | Expenditure Name, Mailing Address and Zip Code | \$ _____ Purpose Code |
| 4. | / / <input type="checkbox"/> Primary <input type="checkbox"/> General | Contributor Name, Mailing Address and Zip Code | \$ _____ \$ _____ Calendar Year-To-Date |
| | | Expenditure Name, Mailing Address and Zip Code | \$ _____ Purpose Code |
| | | Expenditure Total: (Transfer the combined total of all Expenditures on Schedule C pages to the Detailed Summary, page 2 line 8) | \$ _____ |
| | | Contributor Total: (Transfer the combined total of all Contributors on Schedule C pages to the Detailed Summary, page 2 line 3) | \$ _____ |