# 2980

Fax: (208) 334-2282

### CAMPAIGN FINANCIAL DISCLOSURE REPORT

C-2

Rev. 5/11

**SUMMARY PAGE** 

(Please Print or Type) 15 JAM 12 AM 10: 03 Section | Office Sought (if Ean (i) atte) IDAHO Name of Candidate or Political Committee and Chairperson District (if any) Lee Heider State Senate 24 Mailing Address Home Phone City and Zip Work Phone 1631 Richmond Dr. 208-731-1631 208-734-8864 Twin Falls 83301 Name of Political Treasurer Robert A Norman Mailing Address City and Zip Home Phone Work Phone PO Box 5399 Twin Falls 83303 734-7932 733-6581 Change of address for: Candidate or Political Committee Political Treasurer Section II TYPE OF REPORT This filing is an: Original □ Amendment /15 /2014 through 12 /31 /2014 This report is for the period from 11 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: ☐ Yes 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 COLUMN II COLUMNI figures to the Column II figures of your previous report (except on line 6). This Period Calendar Year to Date 21,323.00 Line 1: Cash on Hand January 1, This Calendar Year\* XXXXXX 27,745.00 XXXXXX Line 2: Enter Beginning Cash Balance\*\* \$ 300.00 20,930.00 Line 3: Total Contributions (Enter amount from line 5, page 2) 28,045.00 42,253.00 Line 4: Subtotal (Add lines 1, 2 and 3) 1,063.00 15,271.00 Line 5: Total Expenditures (Enter amount from line 11, page 2) 26,982.00 26,982.00 Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4) Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) \*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 Ysursa Robert A Norman , hereby certify that the information in this Secretary of State Name of Political Treasurer PO Box 83720 Boise ID 83720-0080 report is a true, complete and correct Campaign Financial Disclosure Report as required by law. Phone: (208) 334-2852

Signature of Political Treasurer

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#### DETAILED SUMMARY

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	Name of Candidate or Committee: Lee Heider				
			٠		
				Total This Period	
	Contributions				
	Unitemized Contributions (\$50 and less)	# of Contributors _1	+	\$50.00	
	Itemized Contributions (Total of all Schedule A she	eets)	+	\$250.00	
ľ	In-Kind Contributions (Total of all Contribution am	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)			
	Loans (Total of all New Loan amounts from Schedule D sheets)			\$	
	Total Contributions (Transfer this figure to page 1, Section	n IV, Line 3)	=	\$300.00	
	Expenditures				
-	Unitemized Expenditures (Less than \$25)	# of Expenditures	+	\$	
	Itemized Expenditures (Total of all Schedule B she	eets)	+	\$1,063.00	
	In-Kind Expenditures (Total of all Expenditure amo	ounts from Schedule C sheets)	+	\$	
	Loan Repayments (Total of all Loan Repayment a	+	\$		
	Credit Card and Debt Repayments (Total of all Re	+	\$		
)[	Total Expenditures (Transfer this figure to page 1, Sectio	=	\$1,063.00		
۲	Loans, Credit Cards and Debt				
)	Outstanding Balance from previous reporting perion	od	+	\$	
	New Loans received during this reporting period (Total of all New Loan amounts plus Accrue		+	\$	
	New Credit Card and Debt incurred this reporting (Total of all New Incurred Debt amounts fro		+	\$	
	Subtotal		=	\$	
	Repayments of Loans made during this reporting (Total of all Loan Repayment amounts from	-	\$		
	Repayments of Credit Card and Debt this reportin (Total of all Debt Repayment amounts from	Schedule E sheets)	-	\$	
	Total Outstanding Balance at close of this period (Transfe	er this figure to page 1, Section IV, Line 7)	=	\$	
ſ	Pledged Contributions		- 1		
-	Pledged Contributions Uniternized Pledged Contributions (\$50 and less)	# of Pledges	+	\$	
			+	\$	

## SCHEDULE A ITEMIZED CONTRIBUTIONS

Page	of
1	1

of more than Fifty Dollars (\$50.00) this period

Name of Candid	ate or Committee: Lee Heider		
Date Received	Full Name, Mailing	Address and Zip Code of Contributor	Cash or Check
12 /19 /14 ☐ Primary ☑ General	Eli Lilly and Company     Lilly Corporate Center, Drop Code     Indianapolis, IN 46285	e 1054	\$\frac{250.00}{\\$\frac{250.00}{\text{Calendar Year-To-Date}}}
// □ Primary □ General	2.		\$ Calendar Year-To-Date
// □ Primary □ General	3.		\$ Calendar Year-To-Date
/ / Primary  General	4		\$ Calendar Year-To-Date
// □ Primary □ General	5.		\$ Calendar Year-To-Date
// ☐ Primary ☐ General	6.		\$  Calendar Year-To-Date
// □ Primary □ General	7.		\$
// ☐ Primary ☐ General	8.		\$S_Calendar Year-To-Date
/ / □ Primary □ General	9.		\$S_Calendar Year-To-Date
// □ Primary □ General	10.		\$ Calendar Year-To-Date
		Total This Page:	\$250.00

## SCHEDULE B ITEMIZED EXPENDITURES

Page	of
1	1

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

Name	of Candidate or Committee: Lee Heider				
Purpos	se Codes				
Α	All Travel Expenses (Airfare, Fuel, Lodging & Mileage)	N	Newspaper & Other Periodical Advertising		
В	Broadcast Advertising (Radio, TV & Internet)	0	Other Advertising (Yard Signs, Buttons, etc.)		
С	Contributions to Candidates & PAC's	Ρ	Postage		
D	onations & Gifts S Surveys & Polls				
E Event Expenses		Т	Tickets (Events)		
F Food & Refreshments		U	Utilities		
G General Operational Expenses		W	Wages, Salaries, Benefits & Bonuses		
L	L. Literature, Brochures, Printing Y Petition Circulators				
М	Management Services	Z Preparation & Production of Advertising			
Dot	Count Count Marie Address	and 7: - (	Parla of Daniniant Durnoca Code	Cook or Chook	

Date Spent	Full Name, Mailing Address a	nd Zip Code of Recipient	Purpose Code	Cash or Check
11 18 14	1. Sunriver Resort PO Box 3609 Sunriver, Oregon 97707		A	129.00
11 18 14	2. Lee Heider 1631 Richmond Dr. Twin Falls, ID 83301		A	\$
12 1 14	3. US Bank PO Box 1800 St Paul, MN 55101-1800		G	29.00 \$
12 1 14	4. Association of Idaho Taxpayers PO Box 1665 Boise, ID 83701		E	55.00 \$
12 4 14	5. Roosters Eatery 930 S Vista Ave Bosie, ID 83702		F	150.00 \$
12 18 14	6. Silver Creek Mint PO Box 451 Buhl, ID 83316		G	200.00 \$
	7.			\$
	8.			\$
	9.			\$
	10.			\$
		Total T	his Page:	\$ 1,063.00