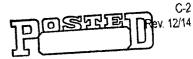




CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

(Please Print or Type)



	SCANNED
on I	

16 JAN 13 PM 1:51

ection I		Office Sought (if candidate)	Y OF S A DISTRICT (If any)
lame of Candidate or Political Committee and Chairperson		Leco Totta	
Maxine Tell	City and Zip	Home Phone	Morking
194 S. 300 E	Jerome 83	338 324-4296	2
Name of Political Treasurer			Wark Phone
LINDA LI BURTON Mailing Address	City and Zip	Home Phone	
828 Teton Dr		338 324-2468	
Change of address for: Candidate or Political Comm	ittee Political Tr	reasurer 🔲	
7tion 11	TYPE OF REPORT		
This filing is an:		£	
This report is for the period fromt	hrough 12/31/P	 → □ October	10 Pre-General Report
7 Day Pre-Primary Report	30 Day Post-Primary Repo		
☐ 7 Day Pre-General Report ☐	30 Day Post-General Repo	ort 📕 Annual F	Report
Semi-Annual Report (Statewide Candidates On	ly)		
Is this a Termination Report:	No		
Section III Directions: If you had no contributions or expenditures Be sure to carry forward the appropriate to the section of the section	contributions and have made		
Cartian IV	SUMMARY		COLUMN II
To reach your Calendar Year to Date figure: Add this rep figures to the Column II figures of your previous report (6)	ort's Column I except on line 6).	COLUMN I This Period	Calendar Year to Date
		s XXXXXX	\$ 1164,42
Line 1: Cash on Hand January 1, This Calendar Year*		<u> </u>	\$ XXXXXX
Line 2: Enter Beginning Cash Balance**		\$ 3560.79	Ψ
Line 3: Total Contributions (Enter amount from line 5, pa	ge 2)	s_1650.00	\$ 1650.00
Line 4: Subtotal (Add lines 1, 2 and 3)		s <u>5210.79</u>	\$ 5210.79
Line 5: Total Expenditures (Enter amount from line 11, p	age 2)	s 4046.37	\$ <u>4046.37</u>
Line 6: Enter Ending Cash Balance (Subtract line 5 from		\$ 1164.42	\$ <u>1164.42</u>
Line 7: Outstanding Debt to Date (Enter amount from li		\$ <u>O</u>	
*This same figure should be entered on line 1 of all rep **This is the figure on line 6 of the last Campaign Finar Note: The closing cash balance for the current reportin	orts filed this calendar year.	. If this is your first report, this a ct report as the beginning cash	amount is 0. on hand.
Section V			

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

Name of Political Treasurer , 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 Treasure

Page 1

DETAILED SUMMARY

Name of Candidate or Committee: Maxine T. Bell

	Total This Period
Contributions Unitemized Contributions (\$50 and less) # of Contributors	<u> </u>
2 Itemized Contributions (Total of all Schedule A sheets)	+ \$1650.60
In-Kind Contributions (Total of all Contribution amounts from Schedule C she	ets) + \$
Loans (Total of all New Loan amounts from Schedule D sheets)	+ \$
Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	= \$1650.00

Expenditures Unitemized Expenditures (Less than \$25) # of Expenditures	+ \$ /77.63
Itemized Expenditures (Total of all Schedule B sheets)	+ \$3868 74
In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$
Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+ \$
Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule	E sheets) + \$
Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	= \$4046.37

		_	
	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)	=	\$ 0
_			

Ple	edged Contributions	
	Unitemized Pledged Contributions (\$50 and less) # of Pledges	+ \$ ⁻
19 _	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$
	tal Pledged Contributions this period	= \$ 0

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

- 211	
Name of Candidate or Committee: Maxine T. Sell	Cash or Check
Date Received Full Name, Mailing Address and Zip Code of Contributor	
1. mountain view Hospital	4000
121/21/15 2325 Coronedo 5t.	HOO.06
Primary I Idaho Falls, Id 83404	Calendar Year-To-Date
General 2. United Health Group	500.06
12,6,15 Q.O BOX 1459	
	\$ 500 Calendar Year-To-Data
General Muroneapolis, MM. 33 TTO	a c
3. Idaho ass. of Ceations	\$ 500-
12/18/15 (6116 W Overland Cd	\$ 500
General Box, St 83769	Calendar Year-To-Date
4. management + Training Corp	s 250 =
12/18/15 P.O BOX 16	\$ 250 -
12/18/15 Primary General P. O BOX 16 Utah 84014	Calendar Year-To-Date
5.	\$
Primary	\$Calendar Year-To-Date
General 6.	¢.
	\$
□ Primary	\$Celendar Year-To-Date
☐ General	Calandar Tear-10-Date
7.	\$
	\$
☐ Primary ☐ General	Calendar Year-To-Date
8.	\$
	·
Primary	Calendar Year-To-Dat
☐ General	1
9.	\$
☐ Primary	\$
☐ General	Calendar Year-To-Da
10.	\$
	\$
☐ Primary ☐ General	Calendar Year-To-Da
Total This Page:	\$ 1650,0

JIFFY LUBE

SCHEDULE B
ITEMIZED EXPENDITURES

PAGE 04/05
Page of Z

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

•	
Li 10 - Hideta as Committage Maria 100 T.	Rell
Name of Candidate or Committee: Marine T.	
Purpose Codes (Enter up to 3 purpose codes per Expenditure.)	and the state of t
A All Travel Expenses (Airfare, Fuel, Lodging & Mileage)	N Newspaper & Other Periodical Advertising
A All Iravel Expenses (Allale, 1 del, Looging & Thiosper)	
B Broadcast Advertising (Radio, TV, Internet & Telephone)	
C Contributions to Candidates & PAC's	r rustage
	S Surveys & Polis
D Donations & Gifts	T Tickets (Events)
E Event Expenses	I MATERIAL -
F Food & Refreshments	U Utilities
Comment Operational Expanses	W Wages, Sataries, Benefits & Bonuses
G General Operational Expenses	Y Petition Circulators
H Independent Expenditures	- D 9 Denduction of Advertising

L Literature, Brochures, Printing Z Preparation & Production of Management Services		Cash or Check
Date Spent Full Name, Mailing Address and Zip Code of Recipient	Purpose Code(s)	Casil of Clieck
1. U.S Post Office 10: Eltan A 3,10,14 Serone, Sd 83338	P	\$ <u>98°</u>
3,14,15 Derone, Id	٤	\$ 68 00
3. Julie Ellaworth P.O BEX 668 32415 Boree, It 83701	N	\$ 600
4. marine T. Bell 1945. 300 E 5,20,15 Jeromo, Il 83338	A	\$ <u>302-87</u>
5. Alcho ST. GOP PD BOX 2267 61\$115 Pouse, Dd 83701		\$ 20000
6. Shiners Hospital 40 Jon June 2283 Cartle Dr 83301 T.F. Dobo 83301	D	s_50.~
7. maxine T- Rell 1945. 300 E	G	\$ 216.33
6)20/15 Deronce, JR 83336 8. GOP 30x 2267 7:30/15 Boise, Id 8 3901		s 252°
9. Maxine T. Bell 1948, 300E	٤	\$ 169.95
10. ag committee Icholars		\$ 100.
10 10 11 De 83 301	Total This Page:	\$ 2055. 15

G

General Operational Expenses

M Management Services

SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee: Makine Purpose Codes (Enter up to 3 purpose codes per Expenditure.) Newspaper & Other Periodical Advertising N All Travel Expenses (Airfare, Fuel, Lodging & Mileage) Other Advertising (Yard Signs, Buttons, etc.) Broadcast Advertising (Radio, TV, Internet & Telephone) ₿ Postage Contributions to Candidates & PAC's C S Surveys & Polls Donations & Gifts D Tickets (Events) τ **Event Expenses** Ε U Utilities Food & Refreshments F Wages, Salaries, Benefits & Bonuses W

Petition Circulators Independent Expenditures Н Preparation & Production of Advertising Literature, Brochures, Printing

Full Name, Mailing Address and Zip Code of Recipient Purpose Code(s) Cash or Check Date Spent BMG 2 1stave Co 81505 Chenele 859 P.O BOX 人 8 334) State Foundation Boise ' michaels 7. 1988 Bridgevin 6 Qd 83301 8. 9. 10. Total This Page: