



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

C-2
Rev. 12/14

16 FEB -1 AM 8:22

Section I

Name of Candidate or Political Committee and Chairperson Ron Mendive		Office Sought (if candidate) State SECRETARY OF STATE	District (if any) A
Mailing Address 3732 S. Dusty Ln.	City and Zip CD'A, 83814	Home Phone 208 667-9330	Work Phone 691-7175
Name of Political Treasurer MITCHELL WRIGHT			
Mailing Address 1570 S. Reynolds Rd.	City and Zip CD'A 83814	Home Phone 664-2734	Work Phone 661-4762

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 / 31 / 15 through 12 / 31 / 15.

- 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 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>3827.86</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ <u>500.00</u>	\$ _____
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>4327.86</u>	\$ _____
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ <u>1390.00</u>	\$ _____
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ <u>2937.86</u>	\$ _____
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:
Secretary of State
PO Box 83720
Boise ID 83720-0080
Phone: (208) 334-2852
Fax: (208) 334-2282

I, MITCHELL WRIGHT, hereby certify that the information in this
Name of Political Treasurer

report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Mitchell Wright
Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee:

Rep. Ron Mendive

			Total This Period
Contributions			
①	Unitemized Contributions (\$50 and less) # of Contributors _____	+	\$
②	Itemized Contributions (Total of all Schedule A sheets)	+	\$ 500.00
③	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+	\$ 0
④	Loans (Total of all New Loan amounts from Schedule D sheets)	+	\$ 0
⑤	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	=	\$ 500.00

Expenditures			
⑥	Unitemized Expenditures (Less than \$25) # of Expenditures _____	+	\$
⑦	Itemized Expenditures (Total of all Schedule B sheets)	+	\$ 1390.00
⑧	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+	\$
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)	=	\$ 1390.00

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: Rep. Ron Mendive

Date Received	Full Name, Mailing Address and Zip Code of Contributor	Cash or Check
10/10/15 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1. Altria Client Services 1415 L St. Suite 1150 Sacramento, Calif. 95814	\$ _____ \$ <u>250.00</u> Calendar Year-To-Date
12/18/15 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2. Avista 1411 E. Mission Ave. Spokane, Wash. 99220	\$ _____ \$ <u>250.00</u> Calendar Year-To-Date
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	3.	\$ _____ \$ _____ Calendar Year-To-Date
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	4.	\$ _____ \$ _____ Calendar Year-To-Date
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	5.	\$ _____ \$ _____ Calendar Year-To-Date
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	6.	\$ _____ \$ _____ 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
Total This Page:		\$ <u>500.00</u>

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: Rep. Ron Mendive

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
<u>2/15/15</u>	1. Signal Point Design E. 6th Ave Post Falls, Id. 83854	Z	\$ <u>84.38</u>
<u>3/3/15</u>	2. Post Falls Ed. Foundation P.O. Box 2083 Post Falls, Id 83854	D	\$ <u>45.00</u>
<u>7/24/15</u>	3. Expedia - Travel Internet	A	\$ <u>289.00</u>
<u>10/1/15</u>	4. Salt Lake - meetings Capital One P.O. Box 85617 Richmond, Va.	A	\$ <u>767.11</u>
<u>11/30/15</u>	5. House of Representatives P.O. Box 83720 Boise, ID. 83720-0054	G PA	\$ <u>105.00</u>
<u>12/30/15</u>	6. Summer Bushnell 5006 E. Portside St. Post Falls, Id. 83854	m	\$ <u>99.51</u>
<u> / / </u>	7.		\$ _____
<u> / / </u>	8.		\$ _____
<u> / / </u>	9.		\$ _____
<u> / / </u>	10.		\$ _____
Total This Page:			\$ <u>1390.00</u>

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