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2018 NOV -2 PM 5: 01

SECRETARY OF STATE
STATE OF IDAHO

REPORT OF ELECTIONEERING COMMUNICATION

For use by a person who has expended \$100 or more per year on electioneering communications.

Any person incurring costs of \$1,000 or more must file within 48 hours of incurring costs.

Name of person/entity Kootenai County Republican Central Committee
Address (Physical) 12463 N Emerald Dr City Hayden State ID Zip 83835
Mailing Address P.O. Box 3438 City Coeur d' Alene State ID Zip 83816
Telephone (208) 610-8926

TYPE OF REPORT

- 7 Day Pre-Primary Report
- 30 Day Post-Primary Report
- 48 Hour Report
- 7 Day Pre-General Report
- 30 Day Post-General Report

Is this an amended report? No Yes

This amends a previous report filed on _____

Date of Public Distribution(s) 10/29/2016

Total Expenditures this Statement	\$	2,528.81
Total Itemized Contributions of \$50 or More this statement	\$	0.00
Total Contributions this statement	\$	0.00

I Michael Towan, hereby certify that the information in this
Name of Individual Completing Report
report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Return This Report To:
Lawrence Denney
Secretary of State
PO Box 83720
Boise ID 83720-0080
phone: (208) 334-2852
fax: (208) 334-2282

Signature of Individual Completing Report

11/01/2018

Date Signed

Itemized Expenditures for Electioneering Communication

Name of person/entity: Kootenai County Republican Central Committee

1. Date Expended <u>10 / 29 / 2018</u>	3. Name (last, first) <u>Direct Mail Ent Inc</u> 4. Address <u>812 N Napa</u> 5. City/State/Zip <u>Spokane, Wa. 99202</u> 6. Method of Communication(s) <u>mailers</u> 7. Name of Candidate(s) referred to <small>State-wide, LD 2,3 and 4, and Kootenai County Republicans, Proposition 1 support, Proposition 2</small> _____
2. Amount \$ <u>2528</u> ^{RL} cash <input type="checkbox"/> in-kind <input type="checkbox"/>	8. Support <input checked="" type="checkbox"/> Oppose <input checked="" type="checkbox"/> 9. Purpose of Expenditure _____

1. Date Expended ____/____/____	3. Name (last, first) _____ 4. Address _____ 5. City/State/Zip _____ 6. Method of Communication(s) _____ 7. Name of Candidate(s) referred to _____ _____
2. Amount \$ _____ cash <input type="checkbox"/> in-kind <input type="checkbox"/>	8. Support <input type="checkbox"/> Oppose <input type="checkbox"/> 9. Purpose of Expenditure _____

1. Date Expended ____/____/____	3. Name (last, first) _____ 4. Address _____ 5. City/State/Zip _____ 6. Method of Communication(s) _____ 7. Name of Candidate(s) referred to _____ _____
2. Amount \$ _____ cash <input type="checkbox"/> in-kind <input type="checkbox"/>	8. Support <input type="checkbox"/> Oppose <input type="checkbox"/> 9. Purpose of Expenditure _____

1. Date Expended ____/____/____	3. Name (last, first) _____ 4. Address _____ 5. City/State/Zip _____ 6. Method of Communication(s) _____ 7. Name of Candidate(s) referred to _____ _____
2. Amount \$ _____ cash <input type="checkbox"/> in-kind <input type="checkbox"/>	8. Support <input type="checkbox"/> Oppose <input type="checkbox"/> 9. Purpose of Expenditure _____