

CAMPAIGN FINANCIAL DJSCLOSURE REPORT

POSTED

Section J

SUMMARY PAGE (Please Print or Type)

Name of Candidate or Political C		opher O		Office Sought (If candidate)	District (if any)						
Mailing Address 273 Claca	Check if address e	honge. City and Zip	83873	Home Phone (082 - 477	Work Phone						
Name of Political Treasurer	Cunn										
Mailing Address Box 30	Chock if address c	change. City and Zip	83839	HomePhone <u>682-2838</u>	Work Phone 482-34 18						
Section II TYPE OF REPORT Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the											
instructional manual for rep This repo	orting periods and d ort is for the per	riod from 11/8	/ OO thro	ough 12 / 3 1 /	00_						
☐ 7 Day Pre-Prima	ry Report	☐ 7 Day Pre-General		Quarterly (April 30) only filed by ballot mea	sure committees)						
0 30 Day Post-Prim	nary Report	0 30 Day Post-Gener		Quarterly (July 30)							
☐ October 10 Pre-G	General Report	Annual Report		only filed by ballot mea	sure committees)						
Is this Report a	n amendment? 0	Yes XNo	Is this a T	ermination Report?	Yes D No						
Section III	STATEMENT	OF NO CONTRIBUT	TIONS OR EX	XPENDITURES =	~ ~ ~						
Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below, fill in the appropriate dares 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 from/ through/											
Section IV		SUMMAR	Y		و نہو						
To reach your Calendar Yea figures to the Column II figures					COLUMN II ndar Year to Date						
Line 1: Cash on Hand Janu	=		\$ <u>x</u>	xxxxx \$_	0						
Line 2: Enter Cash Balance		· -	<u>ئے</u> § <u>ک</u>	<u>598.61</u> s_	XXXXXX 21						
Line 3: Total Contributions (Line 4: Subtotal (Add lines		page 2)	, <u>3</u>	598.67 s	31,972,53						
Line 5: Total Expenditures (Enter amount from page 2) \$ 1655/0 \$ 30()289/-											
Line 6: Cash Balance at Clo	se of Period (Subtra	act line 5 from line 4)**	\$	14757 s	1943.57						
*This same figure should be entered on line I of all reports filed this calendar ycar. **You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period. Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.											
Section V CONTRIBUTIONS PLEDCED - INCURRED EXPENDITURES											
Contributions Pledged	during this reporting	period but not yet receiv	ed: None	□\$ (s	ee attachcd Schedule C-2A						
Incurred Expenditures during this reponing period but <i>not</i> yet paid: None (set attached Schedule C-2B)											
	Section VI CERTIFICATION										
Return This Report To: Pete T. Cenarrusa Secretary of State PO Box 83720 Boise ID 83720-0080 fax: (208) 334-2282 Return This Report To: Pete T. Cenarrusa (name of Political Treasurer) in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.											
						10/11 (#00) 00 T-##U#			1 6 - 1	\ A .k^^^	

DETAILED SUMMARY PAGE

Nsmc of Candidate or Committee Report Covering the Period From 11 / 18 / 00 to 12 / 31 / 00						
UNITEMIZED CONTRIBUTIONS Contributions of Fifty Dollars (\$50.00) or Less This Period						
Total Total Number Amount \$						
UNITEMIZED EXPENDITURES Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period						
Total Total Number Amount \$						

	Total This Period	
Number of Schedule A pages Attached	Ö	
Contributions		
Unitemized Contributions (\$50 and less) from top of page	\$	
Itemized Contributions (total all Schedule A sheets)	\$	
Total Contributions (also enter this figure on page !, Section IV, line 3)	\$ ()	
	ı	
Number of Schedule B pages Attached	-1	
Enpenditurcs		
Unitemized Expenditures (less than \$25) from top of page	s 🔘	
Itemized Expenditures (total all Schedule B sheets)	\$ 1455 10	
Total Expenditures (also enter rhis figure on page I, Section IV, line 5)	s (0.55.10	

SCHEDULEB

ITEMIZED EXPENDITURES

Page of

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

Name of Candidate or Committee Mary Lou Shapker							
		Column A	Column B				
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)				
1. St. 610 52,21,00 St.	Marie: Gasatte Marie Ore Marie ID 83861-1801	s 212,00	\$				
Purpose of Above Expenditure:	AD vertising						
12/21,ω c lo	7505	\$ 80.∞	s				
Purpose of Above Expenditure:	A Questiei 101						
1228au 2163	5. 15th ST 83702	s 1304.10	\$				
Purpoee of Above Expenditure:	cloor Hangers						
The There	UYN, ID 838119	<u>s.59.∞</u>	\$				
Purpose of Above Expenditure:	Radio Advention						
5		\$	s				
Purpose of Above Expenditure:							
6.							
		\$	S				
Purpose of Above Expenditure:							
, , ,		s	s				
Purpose of Above Expenditure:							
8.	Ţ						
i _ l _		\$	s				
Purpose of Above Expenditure:							
9.							
₌ / _/		S	\$				
Purpose of Above Expenditure:							
	Subtotals of Columns A & B	\$655.10	\$				
	s1455.10						