

C-2  
Rev. 7/97



### CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE  
(Please Print or Type)

#### Section I

Name of Candidate or Political Committee and Chairperson <b>Todd M. Hammond</b>		Office Sought (if candidate) <b>Rep.</b>	District (if any) <b>27a</b>
Mailing Address <b>985 Hillview DR.</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>Rexburg 83440</b>	Home Phone <b>359 2517</b>
Name of Political Treasurer <b>Noelle Hammond</b>		Work Phone <b>356 1437</b>	
Mailing Address <b>(same above)</b>	<input type="checkbox"/> Check if address change.	City and Zip	Home Phone
		Work Phone	

#### Section 11

#### 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 reporting periods and due dates.

This report is for the period from 10/1 of 09 to 10/22/00

- 7 Day Pre-Primary Report
- 7 Day Pre-General Report
- 30 Day Post-Primary Report
- 30 Day Post-General Report
- October 10 Pre-General Report
- Annual Report
- Quarterly (April 30)  
(only filed by ballot measure committees)
- Quarterly (July 30)  
(only filed by ballot measure committees)

Is this Report an amendment?  Yes  No  
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, fill in the appropriate dates 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

#### 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 Year'	\$ XXXXXX	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>279<sup>00</sup></u>	X X X
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>2170<sup>00</sup></u>	\$ _____
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>4961<sup>00</sup></u>	\$ _____
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>263<sup>00</sup></u>	\$ _____
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>4698<sup>00</sup></u>	\$ <u>4698<sup>00</sup></u>

\*This same figure should be entered on line 1 of all reports filed this calendar year.  
\*\*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 PLEDGED - INCURRED EXPENDITURES

Contributions Pledged during this reporting period but not yet received:  None 0 % (see attached Schedule C-2A)  
Incurred Expenditures during this reporting period but not yet paid:  None  \$ 1000<sup>00</sup> (see attached Schedule C-2B)

**Return This Report To:**  
Pete T. Cenarrusa  
Secretary of State  
PO Box 83720  
Boise ID 83720-0080  
fax: (208) 334-2282

#### Section VI

#### CERTIFICATION

I, Noelle Hammond, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.  
Noelle Hammond  
Signature of Political Treasurer

**DETAILED SUMMARY PAGE**

Name of Candidate or Committee <span style="font-size: 1.2em; font-family: cursive;">Todd M. Hammond</span>	Report Covering the Period From <u>1/00</u> to <u>10/00</u>
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**UNITEMIZED CONTRIBUTIONS**  
 Contributions of Fifty Dollars (\$50.00) or Less This Period

1

Total Number 1      Total Amount \$ 20<sup>00</sup>

**UNITEMIZED EXPENDITURES**  
 Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total Number 3      Total Amount \$ 63<sup>00</sup>

	Total This Period
<u>2</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>20<sup>00</sup></u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>2150<sup>00</sup></u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>2170<sup>00</sup></u>
<u>  </u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>63<sup>00</sup></u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>200<sup>00</sup></u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>263<sup>00</sup></u>

# SCHEDULE A ITEMIZED CONTRIBUTIONS

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

I " " "

Name of Candidate or Committee  
Todd Hammond

		Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Member	Cash or Check	In-Kind (non-monetary)	Loans
10, 1, 00	1. ASSOCIATED GENERAL CONTRACTORS DAC 110 N. 274 St. BOISE, ID 83702	\$ 200.00		\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10, 1, 00	2. RESURGENCE BLUE SHIELD P.O. BOX 1106 LEWISTON ID 83501-1106	\$ 100.00		\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10, 1, 00	3. IDA BANK STATE FUND P.O BOX 638 BOISE, ID 83701	\$ 100.00		\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10, 6, 00	4. UNION PACIFIC RR. 1416 DODGE ST. OMAHA NE 68179	\$ 350.00		\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10, 10, 00	5. AG & NATURAL RES PAC 5685 PARAPET CT BOISE, ID 83703	\$ 350.00 \$ 800.00		\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10, 12, 00	6. NFIB - IDAHO SAFE TRUST 1201 F ST. NW STE 200 WASHINGTON, DC 20004	\$ 200.00		\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10, 16, 00	7. INTERMOUNTAIN INDUSTRIES, INC. BOX 760B BOISE ID 83707	\$ 100.00		\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10, 19, 00	8. ALLIANCE FOR THE WEST-STATE ACCOUNT 1156 15th St., NW, STE. 550 WASHINGTON, DC 20605	\$ 500.00		\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10, 20, 00	9. AT&T PAC 1875 LAWRENCE ST. DENVER, CO 80202	\$ 100.00		\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<del>10, 20, 00</del>	<del>10. THE RIVER POWER SERVICE COMPANY 1150 N. 2400 E. BOISE, ID 83709</del>	<del>\$ 100.00</del>		<del>\$</del>
<del><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</del>		<del>\$ _____ Calendar Year To Date</del>	<del>\$ _____ Calendar Year To Date</del>	<del>\$ _____ Calendar Year To Date</del>
Subtotals of Columns A, B & C		\$ 2000.00	\$	\$
Total This Page (add columns A, B & C)				\$ 2000.00

SCHEDULE ~~B~~ **A**

ITEMIZED ~~EXPENDITURES~~ CONTRIBUTIONS

of ~~Twenty-Five Dollars (\$25.00)~~ or more this period  
~~FIFTY (\$50.00)~~

Name of Candidate or Committee  
Todd M. Hammond

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10/14/00	1. LORIN C Young 6983 N. 4000 W. ST ANTHONY, ID 83445	\$ 50 <sup>00</sup>	\$
GENERAL Purpose of Above Expenditure:			
10/10/00	2. LUPAC P.O. Box 1832 IDAHO FALLS, ID 83403	\$ 100 <sup>00</sup>	\$
Purpose of Above Expenditure:			
/ /	3.	\$	\$
Purpose of Above Expenditure:			
/ /	4.	\$	\$
Purpusc of Above Expenditure:			
/ /	5	\$	\$
Purpose of Abnve Expenditure:			
/ /	6.	\$	\$
Purpose of Above Expenditure:			
/ /	7	\$	\$
Purpose of Above Expenditure:			
/ /	8.	\$	\$
Purpose of Above Expenditure:			
/ /	9.	\$	\$
Purpose of Above Expenditurc:			
Subtotals of Columns A & B		\$ 150 <sup>00</sup>	\$
Total This Page (add columns A & B)			\$ 150 <sup>00</sup>

# SCHEDULE B ITEMIZED EXPENDITURES

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

Page 1 of 1

Name of Candidate or Committee Todd M. Hammond

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10/20/00	1. ADAM CARRICK ROCKLAND APTS REXBURG, ID 83440	\$ 200 <sup>00</sup>	\$
Purpose of Above Expenditure: CAMPAIGN SIGNS			
1/1/	2.	\$	\$
Purpose of Above Expenditure:			
1/1/	3.	\$	\$ - -
Purpose of Above Expenditure:			
1/1/	4.	\$	\$
Purpose of Above Expenditure:			
1/1/	5.	\$	\$
Purpose of Above Expenditure:			
1/1/	6.	\$	\$
Purpose of Above Expenditure:			
1/1/	7.	\$	\$
Purpose of Above Expenditure:			
1/1/	8.	\$	\$
Purpose of Above Expenditure:			
1/1/	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 200 <sup>00</sup>	\$
Total This Page (add columns A & B)			\$ 200 <sup>00</sup>

### SCHEDULE C-2B EXPENDITURES INCURRED BUT NOT YET PAID

Name of Candidate or Committee <i>Todd Hammond</i>	Kepon Covering the Period From <i>10/1/00</i> to <i>10/24/00</i>
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Directions: Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service, but did not make payment before the end of the reporting period. Do not include these entries on Schedule 13 until you actually make payment.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period: Total Number \_\_\_\_\_ Total Amount \$\_\_

Incurred Expenditures of \$25.00 or More This Period:

Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	Amount Incurred
<i>10/20/00</i>	<i>1. ARNOLD PRESS</i>	<i>1000<sup>00</sup></i>

Purpose of Above Expenditure: *PRINTING COSTS*

<i>10/20/00</i>	<i>2. <del>ARNOLD PRESS</del></i>	<i><del>1000<sup>00</sup></del></i>
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Purpose of Above Expenditure:

<i>10/20/00</i>	<i>3.</i>	
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Purpose of Above Expenditure:

<i>10/20/00</i>	<i>4.</i>	
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Purpose of Above Expenditure:

<i>10/20/00</i>	<i>5.</i>	
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Purpose of Above Expenditure:

<i>10/20/00</i>	<i>6.</i>	
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Purpose of Above Expenditure:

<i>10/20/00</i>	<i>7.</i>	
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Purpose of Above Expenditure:

<i>10/20/00</i>	<i>8.</i>	
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Purpose of Above Expenditure:

Line 2: Total Amount of Incurred Expenditures \$25.00 or more \$ *1000<sup>00</sup>*

Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1) \$ \_\_\_\_\_

Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) An enter this total in Section V, page 1 \$ \_\_\_\_\_