



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

*Posted*

2002 MAY 15 AM 8:41  
STATE OF IDAHO

Section I

Name of Candidate or Political Committee and Chairperson <b>IDAHOANS FOR VOTER RIGHTS</b>		Office Sought (if candidate)	District (if any)	
Mailing Address <b>P O BOX 1278</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>BOISE 83701</b>	Home Phone	Work Phone
Name of Political Treasurer <b>STEVEN A MILLARD</b>				
Mailing Address <b>P O BOX 1278</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>BOISE 83701</b>	Home Phone <b>208-939-4761</b>	Work Phone <b>208-338-5100</b>

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 reporting periods and due dates.

This report is for the period from 01 / 01 / 02 through 05 / 12 / 02

- Day Pre-Primary Report       7 Day Pre-General Report       Quarterly (April 30)  
 (only filed by ballot measure committees)
- 30 Day Post-Primary Report       30 Day Post-General Report
- October 10 Pre-General Report       Annual Report       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
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Line 1: Cash on Hand January 1, This Year*	\$ <u>XXXXXX</u>	\$ <u>11,247.50</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>11,247.50</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>3,000.00</u> ✓	\$ <u>3,000.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>14,247.50</u>	\$ <u>14,247.50</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>13,435.75</u> ✓	\$ <u>13,435.75</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>811.75</u> ✓	\$ <u>811.75</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     \$ \_\_\_\_\_ (see attached Schedule C-2A)

Incurred Expenditures during this reporting period but not yet paid:         None     \$ \_\_\_\_\_ (see 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

I **STEVEN A MILLARD** \_\_\_\_\_, hereby certify that the information  
(name of Political Treasurer)  
 in this report is a true, complete and correct Campaign Financial Disclosure Report as  
 required by law.

*Steven A. Millard*  
 Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <b>IDAHOANS FOR VOTER RIGHTS</b>	Report Covering the Period From <u>01 / 01 / 02</u> to <u>05 / 12 / 02</u>
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<b>UNITEMIZED CONTRIBUTIONS</b> Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>0</u>	Total Amount \$ <u>0.00</u>
<b>UNITEMIZED EXPENDITURES</b> Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>0</u>	Total Amount \$ <u>0.00</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ 0.00
Itemized Contributions (total all Schedule A sheets)	\$ 3,000.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 3,000.00
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 0.00
Itemized Expenditures (total all Schedule B sheets)	\$ 13,435.75
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 13,435.75

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

Name of Candidate or Committee  
**IDAHOANS FOR VOTER RIGHTS**

		Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
<u>02</u> / <u>08</u> / <u>02</u>	1. <b>JACK A BUELL</b> 318 HIGHLAND DR ST MARIES, ID 83861	\$ <u>800.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>800.00</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
<u>02</u> / <u>21</u> / <u>02</u>	2. <b>ASSOCIATION OF IDAHO CITIES</b> 3314 GRACE STREET BOISE, ID 83703	\$ <u>400.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>400.00</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
<u>02</u> / <u>21</u> / <u>02</u>	3. <b>GAGNER CAMPAIGN</b> P O BOX 50699 IDAHO FALLS, ID 83405	\$ <u>300.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>300.00</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
<u>02</u> / <u>25</u> / <u>02</u>	4. <b>POTLATCH</b> P O BOX 1348 LEWISTON, ID 83501	\$ <u>500.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>500.00</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
<u>02</u> / <u>27</u> / <u>02</u>	5. <b>IDAHO HOSPITAL ASSOCIATION</b> P O BOX 1278 BOISE, ID 83701	\$ <u>400.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>400.00</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
<u>03</u> / <u>01</u> / <u>02</u>	6. <b>CONTRACTORS NORTHWEST INC</b> P O BOX 6300 COEUR D'ALENE, ID 83816	\$ <u>200.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>200.00</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
<u>03</u> / <u>01</u> / <u>02</u>	7. <b>IDAHO ASSOC OF COUNTIES</b> P O BOX 1623 BOISE, ID 83701	\$ <u>400.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>400.00</u> <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
_ / _ / _	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
_ / _ / _	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
_ / _ / _	10.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
Subtotals of Columns A, B & C		\$ <u>3,000.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>
Total This Page (add columns A, B & C)				\$ <u>3,000.00</u>

**SCHEDULE B**  
**ITEMIZED EXPENDITURES**  
of Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee  
**IDAHOANS FOR VOTER RIGHTS**

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
02/04/02	1. IACI P O BOX 389 BOISE, ID 83701	\$ 4,253.70	\$ _____
Purpose of Above Expenditure: REIMBURSEMENT FOR NEWSPAPER ADVERTISEMENT			
02/11/02	2. JANE GORSUCH 350 N 9TH STREET SUITE 304E BOISE, ID 83702	\$ 762.30	\$ _____
Purpose of Above Expenditure: PRINTING			
02/11/02	3. CLEMENTS BROWN McNICHOLS PA P O BOX 1510 LEWISTON, ID 83501	\$ 4,378.50	\$ _____
Purpose of Above Expenditure: LEGAL FEES			
03/11/02	4. WELLS FARGO 119 N 9TH STREET BOISE, ID 83702	\$ 13.25	\$ _____
Purpose of Above Expenditure: BANK CHARGE			
03/21/02	5. JERRY MASON 250 NW BLVD SUITE 204 COEUR d'ALENE, ID 83814	\$ 4,000.00	\$ _____
Purpose of Above Expenditure: LEGAL FEES			
05/02/02	6. WELLS FARGO 119 N 9TH STREET BOISE, ID 83702	\$ 28.00	\$ _____
Purpose of Above Expenditure: BANK CHARGE			
/ /	7.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 13,435.75	\$ 0.00
Total This Page (add columns A & B)			\$ 13,435.75