



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

Section I

| | | | |
|--|---|--|-------------------------------|
| Name of Candidate or Political Committee and Chairperson CRANE FOR IDAHO STATE TREASURER | | Office Sought (if candidate) STATE TREASURER | District (if any) |
| Mailing Address P.O. Box 865 | <input type="checkbox"/> Check if address change. | City and Zip Nampa 83653 | Home Phone 463-4000 |
| Name of Political Treasurer JERRY L. WRAY | | Work Phone 334-3200 | |
| Mailing Address 1291 S. ORIOLE WAY | <input type="checkbox"/> Check if address change. | City and Zip BOISE 83709 | Home Phone 323-0145 |
| | | Work Phone | |

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 10 / 1 / 02 through 10 / 20 / 02

- | | | |
|--|--|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report | <input checked="" type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> Quarterly (April 30) (only filed by ballot measure committees) |
| <input type="checkbox"/> 30 Day Post-Primary Report | <input type="checkbox"/> 30 Day Post-General Report | <input type="checkbox"/> Quarterly (July 30) (only filed by ballot measure committees) |
| <input type="checkbox"/> October 10 Pre-General Report | <input type="checkbox"/> Annual Report | |

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 | \$ 10748.80 |
| Line 2: Enter Cash Balance at Close of Last Reporting Period** | \$ 15428.58 | \$ XXXXXX |
| Line 3: Total Contributions (Enter amount from page 2) | \$ 1250.00 | \$ 18735.00 |
| Line 4: Subtotal (Add lines 1, 2 and 3) | \$ 16678.58 | \$ 29483.80 |
| Line 5: Total Expenditures (Enter amount from page 2) | \$ 2093.70 | \$ 14898.92 |
| Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** | \$ 14584.88 | \$ 14584.88 |

*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

I Jerry L. Wray, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Jerry L. Wray
Signature of Political Treasurer

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

DETAILED SUMMARY PAGE

| | |
|--------------------------------|---|
| Name of Candidate or Committee | Report Covering the Period From ___/___/___ to ___/___/___ |
|--------------------------------|---|

| | |
|--|-----------------------------------|
| UNITEMIZED CONTRIBUTIONS | |
| Contributions of Fifty Dollars (\$50.00) or Less This Period | |
| Total Number <u> 1 </u> | Total Amount \$ <u> 50.00 </u> |

| | |
|---|-----------------------------------|
| UNITEMIZED EXPENDITURES | |
| Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period | |
| Total Number <u> 1 </u> | Total Amount \$ <u> 10.50 </u> |

| | Total This Period |
|---|-------------------|
| <u> </u> Number of Schedule A pages Attached | 1 |
| Contributions | |
| Unitemized Contributions (\$50 and less) from top of page | \$ 50.00 |
| Itemized Contributions (total all Schedule A sheets) | \$ 1200.00 |
| Total Contributions (also enter this figure on page 1, Section IV, line 3) | \$ 1250.00 |
| <u> </u> Number of Schedule B pages Attached | 1 |
| Expenditures | |
| Unitemized Expenditures (less than \$25) from top of page | \$ 10.50 |
| Itemized Expenditures (total all Schedule B sheets) | \$ 2083.20 |
| Total Expenditures (also enter this figure on page 1, Section IV, line 5) | \$ 2093.70 |

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

Name of Candidate or Committee
CRANE FOR IDAHO STATE TREASURER

| Date/ Receipt For | Full Name, Mailing Address and Zip Code of Contributor/Lender | Column A | Column B | Column C |
|---|--|-----------------------------------|-----------------------------------|-----------------------------------|
| | | Cash or Check | In-Kind (non-monetary) | Loans |
| <u>10/9/02</u> | 1. IDAHO LIFE & HEALTH IND. PAC P.O. Box 48 Nampa ID 83653 | \$ <u>250.00</u> | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| <u>10/9/02</u> | 2. DAVID HILLS 7870 S. POWERLINE Rd. Nampa ID 83686 | \$ <u>500.00</u> | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| <u>10/9/02</u> | 3. LUPAC - IDAHO P.O. Box 1832 IDAHO FALLS, ID 83403 | \$ <u>250.00</u> | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| <u>10/16/02</u> | 4. WELLS FARGO - IDAHO PAC 119 N. 9th St. BOISE ID | \$ <u>100.00</u> | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| <u>10/20/02</u> | 5. IDAHO BUS. & AG. COMM. P.O. Box 50780 IDAHO FALLS, ID 83405 | \$ <u>100.00</u> | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| <u> / / </u> | 6. | \$ _____ | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| <u> / / </u> | 7. | \$ _____ | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| <u> / / </u> | 8. | \$ _____ | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| <u> / / </u> | 9. | \$ _____ | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| <u> / / </u> | 10. | \$ _____ | \$ _____ | \$ _____ |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| Subtotals of Columns A, B & C | | \$ <u>1200.00</u> | \$ _____ | \$ _____ |
| Total This Page (add columns A, B & C) | | | | \$ <u>1200.00</u> |

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

Name of Candidate or Committee
CRANE FOR IDAHO STATE TREASURER

| Date | Full Name, Mailing Address and Zip Code of Recipient | Column A | Column B |
|--|---|---------------|------------------------|
| | | Cash or Check | In-Kind (non-monetary) |
| 10/2/02 | 1. WRIGHT SIGNS, INC 1375 WALL AVE. OGDEN, UT 84404 | \$ 440.51 | \$ |
| Purpose of Above Expenditure: <u>BUMPER STICKERS</u> | | | |
| 10/3/02 | 2. AQEM SUPPLY 715 ALBANY ST CALDWELL, ID 83605 | \$ 58.63 | \$ |
| Purpose of Above Expenditure: <u>WIRE TIES</u> | | | |
| 10/4/02 | 3. VALERIE SCHATZ 16511 BRAMBLE LANE LEWISTON, ID 83501 | \$ 150.00 | \$ |
| Purpose of Above Expenditure: <u>SIGN DISTRIBUTION</u> | | | |
| 10/5/02 | 4. U-HALL TRAILER SALES 2112 CALDWELL BLVD NANPA ID 83651 | \$ 53.39 | \$ |
| Purpose of Above Expenditure: <u>TRAILER RENTAL</u> | | | |
| 10/13/02 | 5. BROOK SCHATZ 16511 BRAMBLE LANE LEWISTON, ID 83501 | \$ 25.92 | \$ |
| Purpose of Above Expenditure: <u>WIRE TIES</u> | | | |
| 10/14/02 | 6. IDAHO REPUBLICAN PARTY 1150 W. STATE ST. #300 BOISE ID 83702 | \$ 500.00 | \$ |
| Purpose of Above Expenditure: <u>BUS TOUR</u> | | | |
| 10/14/02 | 7. STONE LUMBER CO. P.O. BOX 70 NANPA ID 83653 | \$ 729.75 | \$ |
| Purpose of Above Expenditure: <u>REBAR STAKES</u> | | | |
| 10/14/02 | 8. JUSTIN POUlsen 4702 W. PASADENA LN. #202 BOISE, ID 83705 | \$ 125.00 | \$ |
| Purpose of Above Expenditure: <u>SIGN DISTRIBUTION</u> | | | |
| / / | 9. | \$ | \$ |
| Purpose of Above Expenditure: | | | |
| Subtotals of Columns A & B | | \$ 2083.20 | \$ |
| Total This Page (add columns A & B) | | \$ | \$ 2083.20 |