



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

Section I

Name of Candidate or Political Committee and Chairperson Bob Sonnichsen		Office Sought (if candidate) State Controller	District (if any)
Mailing Address P.O. Box 4021	Check if address change: <input checked="" type="checkbox"/>	City and Zip Boise, 83711	Home Phone (208) 322-4106
Name of Political Treasurer Cynthia A. Polenske		Work Phone (208) 383-7017	
Mailing Address P.O. Box 4021	Check if address change: <input checked="" type="checkbox"/>	City and Zip Boise, 83711	Home Phone (208) 376-6630
		Work Phone (208) 376-6630	

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 05 / 13 / 02 through 06 / 07 / 02

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

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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	\$ 0.00
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 2,584.63	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 780.00	\$ 5,250.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 3,344.63	\$ 5,250.00
Line 5: Total Expenditures (Enter amount from page 2)	\$ 318.42	\$ 2,223.79
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 3,026.21	\$ 3,026.21

*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 \$ 1,582.55 (see attached Schedule C-2B)

Section VI

CERTIFICATION

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

Cynthia A. Polenske
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 Bob Sonnichsen for State Controller	Report Covering the Period From <u>05</u> / <u>13</u> / <u>02</u> to <u>06</u> / <u>07</u> / <u>02</u>
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UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 4 Total Amount \$ 105.00

UNITEMIZED EXPENDITURES

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

Total Number 1 Total Amount \$ 21.00

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 105.00
Itemized Contributions (total all Schedule A sheets)	\$ 675.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 780.00
_____ Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 21.00
Itemized Expenditures (total all Schedule B sheets)	\$ 297.42
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 318.42

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

Name of Candidate or Committee
Bob Sonnichsen for State Controller

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
05 / 21 / 02 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1. Michael Learned 1901 S. Springbrook Lane Boise, ID 83706	\$ 100.00	\$	\$
		\$ 100.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
05 / 21 / 02 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2. Neil P. Moss 1607 W. Jefferson Street Boise, ID 83702	\$ 75.00	\$	\$
		\$ 75.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
05 / 21 / 02 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3. Walter C. Minnick 1094 Hearthstone Drive Boise, ID 83702	\$ 500.00	\$	\$
		\$ 500.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	4.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	5.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	6.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	7.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	8.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
____ / ____ / ____ <input type="checkbox"/> Primary <input type="checkbox"/> General	9.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ 675.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 675.00

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
Bob Sonnichsen for State Controller

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
05 / 21 / 02	1. Idaho Democratic Party 708 W. Franklin Rd Boise, ID 83702	\$ 50.00	\$
Purpose of Above Expenditure: Primary Party Contribution			
05 / 28 / 02	2. Verizon Wireless P.O. Box 96081 Bellevue, WA 98009-9681	\$ 42.28	\$
Purpose of Above Expenditure: Telephone Monthly Charge			
05 / 28 / 02	3. Chase Platinum Visa P.O. Box 52126 Phoenix, AZ 85072-2126	\$ 100.00	\$
Purpose of Above Expenditure: Visa Payment			
05 / 31 / 02	4. Costco Wholesalers 8109 W. Franklin Boise, ID 83709	\$ 25.14	\$
Purpose of Above Expenditure: Parade Giveaways			
06 / 05 / 02	5. Cassia County Democrats 2041 V Street Heyburn, Idaho 83318	\$ 80.00	\$
Purpose of Above Expenditure: Party Contribution (Convention)			
____ / ____ / ____	6.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 297.42	\$ 0.00
Total This Page (add columns A & B)			\$ 297.42

SCHEDULE C-2B EXPENDITURES INCURRED BUT NOT YET PAID

Name of Candidate or Committee Bob Sonnichsen for State Controller	Report Covering the Period From <u>05 / 13 / 02</u> to <u>06 / 07 / 02</u>
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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 B until you actually make payment.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period:	Total Number <u>4</u>	Total Amount \$ <u>60.91</u>
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Incurred Expenditures of \$25.00 or More This Period:

Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	Amount Incurred
05 / 21 / 02	1. Capitol Lighograph & Printing, Inc. 610 W. Idaho Boise, ID 83702	\$ 635.25
Purpose of Above Expenditure: Printing Costs		
05 / 21 / 02	2. Kinkos, Inc. 271 N. Milwaukee Street Boise, ID 83704	\$ 75.53
Purpose of Above Expenditure: Printing Costs		
05 / 21 / 02	3. US Postal Service 750 W. Bannock Street Boise, ID 83702	\$ 306.00
Purpose of Above Expenditure: Postage		
05 / 24 / 02	4. US Postal Service Borah Station Boise, ID 83702	\$ 136.00
Purpose of Above Expenditure: Postage		
05 / 31 / 02	5. Kinkos, Inc. 691 S. Capitol Blvd. Boise, ID 83702	\$ 163.87
Purpose of Above Expenditure: Printing Costs		
05 / 20 / 02	6. Office Max 8551 W. Franklin Rd Boise, ID 83704	\$ 169.99
Purpose of Above Expenditure: Printing Costs		

Line 2: Total Amount of Incurred Expenditures \$25.00 or more	\$ <u>See page 2</u>
Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1)	\$ <u>1</u>
Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Section V, page 1.	\$ _____

SCHEDULE C-2B EXPENDITURES INCURRED BUT NOT YET PAID

Name of Candidate or Committee Bob Sonnichsen for State Controller	Report Covering the Period From <u>05 / 13 / 02</u> to <u>06 / 07 / 02</u>
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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 B until you actually make payment.

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

Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	Amount Incurred
05 / 16 / 02	1. Le Cafe De Paris 204 North Capitol BLVD Boise, Idaho 83702	\$ 35.00
Purpose of Above Expenditure: Meals for Campaign Workers		
/ /	2.	\$ _____
Purpose of Above Expenditure:		
/ /	3.	\$ _____
Purpose of Above Expenditure:		
/ /	4.	\$ _____
Purpose of Above Expenditure:		
/ /	5.	\$ _____
Purpose of Above Expenditure:		
/ /	6.	\$ _____
Purpose of Above Expenditure:		

Line 2: Total Amount of Incurred Expenditures \$25.00 or more	\$ <u>1527.64</u>
Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1)	\$ <u>60.91</u>
Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Section V, page 1.	\$ <u>1582.55</u>