



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

Section I

Name of Candidate or Political Committee and Chairperson GARY BRADY		Office Sought (if candidate) Senate	District (if any) 9:034
Mailing Address 3124 Highland Dr	City and Zip Twin Falls	Home Phone 734-9450	Work Phone 733-2121
Name of Political Treasurer Bob Parrish		STATE OF IDAHO	
Mailing Address	City and Zip	Home Phone	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 01/01/04 through 07/25/06

- 7 Day Pre-Primary Report
 30 Day Post-Primary Report
 October 10 Pre-General Report
 7 Day Pre-General Report
 30 Day Post-General Report
 Annual Report
 Semi-Annual Report (Statewide Candidates Only)

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 01/01/04 through 07/25/06

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*	\$ <u>XXXXXX</u>	\$ <u>162,72</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ _____	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ _____	\$ <u>0</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ _____	\$ <u>162,72</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ _____	\$ <u>162,72</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ _____	\$ <u>0</u>
Line 7: Outstanding Debt to Date	\$ <u>0</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.

Donated to Brady for Governor

Return This Report To:
Ben Yursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
phone: (208) 334-2852
fax: (208) 334-2282

Section V

CERTIFICATION

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

Gary Brady
Signature of Political Treasurer

GARY D. BATY
ROBERT L. PARRISH
COMMITTEE TO ELECT BATY
2778 CHAPARRAL CIRCLE 208-734-9450
TWIN FALLS, ID 83301

1003

Date 7-15-06 82-7017/3241
03

Pay to the Order of Brady for Gov Campaign Fund \$ 162 ⁷³/₁₀₀
One hundred sixty two & ⁷³/₁₀₀ Dollars

FIRST FEDERAL
555 Shaw Lake Blvd. North • Box 1885
Twin Falls, Idaho 83301

Gary D. Baly

For _____
[Redacted]



FIRST FEDERAL

Call Center
 • (208) 733-4222
 Teller Phone
 • (208) 733-0778
 Web Address
 • www.firstfd.com

*****AUTO**5-DIGIT 83301
 956 0.4210 AV 0.293 5 1 95
 GARY D BATY
 OR ROBERT L PARRISH
 COMMITTEE TO ELECT BATY
 3128 HIGHLAWN DR
 TWIN FALLS ID 83301-8415

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Balance
 162.72

Beginning Balance	6/19/06	162.72	
Deposits / Misc Credits	0	.00	
Withdrawals / Misc Debits	0	.00	
** Ending Balance	7/16/06	162.72	**
Service Charge		.00	

FDIC Insured

NOTICE: SEE REVERSED SIDE FOR IMPORTANT INFORMATION