



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

Section I

Name of Candidate or Political Committee and Chairperson <b>SHARON L. BLOCK</b>		Office Sought (if candidate) <b>ST. REP B</b>	District (if any) <b>24</b>
Mailing Address <input type="checkbox"/> Check if address change. <b>1093 LAKEWOOD DR.</b>		City and Zip <b>TWIN FALLS, 83301</b>	Home Phone <b>(208) 734-6360</b>
Name of Political Treasurer <b>DELBERT W. BLOCK</b>		Work Phone <b>SAME</b>	
Mailing Address <input type="checkbox"/> Check if address change. <b>1093 LAKEWOOD DR.</b>		City and Zip <b>TWIN FALLS, 83301</b>	Home Phone <b>(208) 734-6360</b>
		Work Phone <b>SAME</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 JUNE 3 1 2 0 6 through SEPT. 30 1 0 6

- 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          /          /          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*	\$ <u>XXXXXX</u>	\$ <u>957.55</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>1,507.55</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>500.00</u>	\$ <u>1,050.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>2,007.55</u>	\$ <u>2,007.55</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>73.21</u>	\$ <u>73.21</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>1,934.34</u>	\$ <u>1,934.34</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.

**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 DELBERT W. BLOCK hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Delbert W. Block  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee

SHARON L. BLOCK

Report Covering the Period

From 6/30/06 to 9/30/06

### UNITEMIZED CONTRIBUTIONS

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

Total  
Number -0-

Total  
Amount \$ -0-

### UNITEMIZED EXPENDITURES

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

Total  
Number -0-

Total  
Amount \$ -0-

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>-0-</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>500.00</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>500.00</u>
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>-0-</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>73.21</u>
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>73.21</u>
Number of Schedule C-2B pages Attached	
<b>Incurred Expenditures</b>	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$
Payment this Period (Total all C-2Bs - Payment this Period)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$
Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	
Amount Pledged this Period	\$

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

Name of Candidate or Committee:

SHARON L. BLOCK

		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
8/24/06	1. ID. MEDICAL ASSN. P.O. BOX 2668 BOISE, ID. 83701	\$ 300.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 300.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
8/24/06	2. ASRA - PAC ID. FARM BUREAU FED. P.O. BOX 4848 POCATELLO, ID. 83205	\$ 200.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 200.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
/ /	3.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
/ /	4.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
/ /	5.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
/ /	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
/ /	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
/ /	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
/ /	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
/ /	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		\$ 500.00	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ 500.00

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

Name of Candidate or Committee  
**SHARON L. BLOCK**

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
8/24/06	1. <b>BLIP PRINTERS 238 BLUE LAKES BLVD. TWIN FALLS, ID. 83301</b>	\$ <u>73.21</u>	\$ _____
Purpose of Above Expenditure: <b>CAMPAIGN BROCHURES</b>			
____/____/____	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:			
____/____/____	7.	\$ _____	\$ _____
Purpose of Above Expenditure:			
____/____/____	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
____/____/____	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ <u>73.21</u>	\$ _____
Total This Page (add columns A & B)			\$ <u>73.21</u>