



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

06 JUN 22 AM 11:52

Section I

Name of Candidate or Political Committee and Chairperson Robert A. Wallace		Office Sought (if candidate) Attorney General	District (if any) STATE OF IDAHO
Mailing Address P.O. Box 505	<input type="checkbox"/> Check if address change.	City and Zip Boise, 83701	Home Phone 208.344.0047
Name of Political Treasurer Carolyn Boyce		Home Phone 208.344.1297	Work Phone 208.342.0100
Mailing Address 9205 Overland Road	<input type="checkbox"/> Check if address change.	City and Zip Boise, 83709	Home Phone 208.344.1297
		Work Phone 208.322.1052	

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 / 08 / 2006 through 06 / 02 / 2006

- 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*	\$ XXXXXX	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 1,649. ³⁰	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 1,900. ⁰⁰	\$ 5,674. ⁶⁰
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 3,549. ³⁰	\$ 5,674. ⁶⁰
Line 5: Total Expenditures (Enter amount from page 2)	\$ 1,445. ²⁴	\$ 3,570. ⁵⁴
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 2,104. ⁰⁶	\$ 2,104. ⁰⁶
Line 7: Outstanding Debt to Date	\$ 0	

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

Carolyn Boyce
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee Robert A. Wallace	Report Covering the Period From 05 / 08 / 2006 to 06 / 02 / 2006
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u> 2 </u>	Total Amount \$ <u>100.⁰⁰</u>

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u> 8 </u>	Total Amount \$ <u>84.⁵⁶</u>

	Total This Period
<u> 1 </u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 100. ⁰⁰
Itemized Contributions (total all Schedule A sheets)	\$ 1,800. ⁰⁰
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 1,900. ⁰⁰
<u> 1 </u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 84. ⁵⁶
Itemized Expenditures (total all Schedule B sheets)	\$ 1,360. ⁶⁸
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)	\$ 1,445. ²⁴
<input checked="" type="checkbox"/> Number of Schedule C-2B pages Attached	
Incurred Expenditures	
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)	= \$ —
<input checked="" type="checkbox"/> Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$ —

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

Name of Candidate or Committee
Robert A. Wallace

		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
05/30/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	1. Janet S. Buschert Russell W. Buschert 235 West Floating Feather Rd Eagle, Idaho 83616	\$ 100.00	\$ _____	\$ _____
		\$ 100.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
05/30/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2. Robert C. Huntley Elfriede Huntley 604 San Felipe Way Boise, Idaho 83714	\$ 250.00	\$ _____	\$ _____
		\$ 250.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
05/30/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	3. Dennis McArthur Linda McArthur P.O. Box 221 Lona, Idaho 83427.00221	\$ 100.00	\$ _____	\$ _____
		\$ 100.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
05/15/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	4. Gail Haldeman 6948 West Gillis Boise, Idaho 83703	\$ 100.00	\$ _____	\$ _____
		\$ 100.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
05/15/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	5. Sara Shepard, Lawyer PLLC P.O. Box 1246 Boise, Idaho 83701.1246	\$ 250.00	\$ _____	\$ _____
		\$ 250.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
05/10/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	6. Robert Miller, Attorney 2700 West Airport Way Boise, Idaho 83705	\$ 500.00	\$ _____	\$ _____
		\$ 500.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
05/10/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7. Merck E. Lipson Hillevi V. Lipson 1544 Trestle Glen Road Oakland, CA 94610	\$ 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	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>
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	10.	\$ _____	\$ _____	\$ _____
		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
Subtotals of Columns A, B & C		\$ 1,800.00	\$ 0	\$ 0
Total This Page (add columns A, B & C)				\$ 1,800.00

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

Name of Candidate or Committee
Robert A. Wallace

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
05/29/06	1. Comp USA 1195 North Milwaukee Boise, Idaho 83704	\$ 241.49	\$ _____
Purpose of Above Expenditure: Computer software, Access database			
05/26/06	2. Standard Printing Solutions 140 2nd Avenue North Twin Falls, Idaho 83301	\$ 70.00	\$ _____
Purpose of Above Expenditure: Marketing, Palm Cards			
05/25/06	3. Billingsly Creek Lodge 17940 U.S. Highway 30 Hagerman, Idaho 83332	\$ 324.00	\$ _____
Purpose of Above Expenditure: Lodging, Campaign Event			
05/20/06	4. Campaign Manager Raegan Komper Ud 4028 Glendale Apt. B Boise, Idaho 83703	\$ 300.00	\$ _____
Purpose of Above Expenditure: Contract Payment			
05/20/06	5. Walmart Garden City, Idaho	\$ 85.26	\$ _____
Purpose of Above Expenditure: Office supplies, copier paper, printer cartridge			
05/14/06	6. Red Lion Templin's Hotel on the River 414 East 1st Avenue Post Falls, Idaho 83854	\$ 139.00	\$ _____
Purpose of Above Expenditure: Lodging, Campaign Event			
/ /	7.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 1,360.00	\$ 0
Total This Page (add columns A & B)			\$ 1,360.00

**SCHEDULE C-2A
CONTRIBUTIONS PLEDGED BUT NOT YET RECEIVED**

Name of Candidate or Committee _____	Report Covering the Period From ____/____/____ to ____/____/____
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Directions: Complete this schedule if you were promised and agreed to accept a contribution during this reporting period but have not actually received the money, goods or services offered before the end of the reporting period. Do not include these entries on Schedule A until you actually receive the contribution.

Line 1: Pledged Contributions of \$50.00 or Less This Period: Total Number _____ Total Amount \$_____
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Pledged Contributions of More Than \$50.00 This Period:

Pledge For	Date of Pledge	Full Name, Mailing Address and Zip Code of Contributor/Lender	Amount Pledged
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	1. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	2. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	3. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	4. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	5. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	6. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	7. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	8. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	9. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	10. _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	11. _____	

Line 2: Total Amount of Pledged Contributions of More Than \$50.00 \$ _____

Line 3: Total Amount of Pledged Contributions of \$50.00 or Less (enter amount from line 1) \$ _____

Line 4: Total Amount of Pledged Contributions this Period (add lines 2 and 3) Also enter this total on page 2. \$ _____

**SCHEDULE C-2B
EXPENDITURES INCURRED (Debts and Obligations) & PAYMENT MADE ON DEBT**

Name of Candidate or Committee _____	Report Covering the Period From ____/____/____ to ____/____/____
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Directions: Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service or made a payment on debt. Do not include these entries on Schedule B.

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

Expenditures Incurred (Debts and Obligations) or Payment Made on Debt of \$25.00 or More This Period:

Full Name, Mailing Address and Zip Code or Creditor	Purpose of Expenditure
1.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	
2.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	
3.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	
4.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	
5.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	

Totals of this Page

Line 2: Amount Incurred This Period (Carry forward to Page 2, Under Incurred Expenditures) \$ _____

Line 3: Payment This Period (Carry forward to Page 2, under Expenditures and Incurred Expenditures) \$ _____