CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE

14 MAY 13 AM 07:12

C-2 Rev. 5/11

(Please Print or Type)

SECRETARY OF STATE STATE OF IDAHO

Section i				
Name of Candidate or Political Comm	nittee and Chairperson		Office Sought (if candida	1 - 1
Michael J Griffin Mailing Address		City and Zip	Dist Jdg Home Phone	2 Work Phone
403 Oak St		Grangeville 83530	2089831385	2089832776
Name of Political Treasurer Sarah Shepherd				
Mailing Address		City and Zip	Home Phone	Work Phone
2631 Seaport Dr		Lewiston 83501	2084136650	
Change of address for:	Candidate or Political Committee	ee 🛘 Political Treasu	urer 🗆	
Section II This filing is an:	Original Amendmen	TYPE OF REPORT t		
This report is for the period from	m <u>01 / 01 / 2014</u> thro	ough <u>05 / 04 / 2014</u>		
7 Day Pre-Primary R	eport 30	Day Post-Primary Report	Octobe	r 10 Pre-General Report
7 Day Pre-General R	Report 30	Day Post-General Report	Annual	Report
Semi-Annual Report Is this a Termination Report:	(Statewide Candidates Only) Yes No			
			the box next to the stat	ement below and sign this report.
I hereby cert	ify that I have received no cont	tributions and have made no	expenditures during this	reporting period.
Section IV		SUMMARY		
To reach your Calendar Year to figures to the Column II figures			COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January	1, This Calendar Year*	\$_	XXXXXX	\$ 0.00
Line 2: Enter Beginning Cash E	Balance**	\$_	0.00	\$ XXXXXX
Line 3: Total Contributions (Ent	er amount from line 5, page 2)	\$_	150.00	\$ <u>150.00</u>
Line 4: Subtotal (Add lines 1, 2	and 3)	\$_	150.00	\$ <u>150.00</u>
Line 5: Total Expenditures (Ent	er amount from line 11, page 2	2) \$_	150.00	\$ <u>150.00</u>
Line 6: Enter Ending Cash Bala	ance (Subtract line 5 from line	4) \$_	0.00	\$ 0.00
Line 7: Outstanding Debt to Da	ate (Enter amount from line 18,	page 2) \$_	150.00	
*This same figure should be en **This is the figure on line 6 of Note: The closing cash balance	the last Campaign Financial Di	isclosure Report filed. If this is		
	Section V			
Return This Report To:				
Ben Ysursa	ı. Saral	h Shepherd	. hereby certify th	at the information in this
Secretary of State PO Box 83720	-,N	ame of Political Treasurer	,, co, u.	
Boise ID 83720-0080 Phone: (208) 334-2852	report is a true, cor	mplete and correct Campaign	Financial Disclosure Re	port as required by law.
Fax: (208) 334-2282		D	igital Signature	
	-	Sigr	nature of Political Treasu	ırer

DETAILED SUMMARY

Name of Candidate or Committee: Michael J Griffin

				Total This Period
Con	ntributions			
1	Unitemized Contributions (\$50 and less)	# of Contributors O	+	\$0.00
2	Itemized Contributions (Total of all Schedule A st	heets)	+	\$0.00
3	In-Kind Contributions (Total of all Contribution an	mounts from Schedule C sheets)	+	\$0.00
4	Loans (Total of all New Loan amounts from Sche	edule D sheets)	+	\$150.00
5 Tota	al Contributions (Transfer this figure to page 1, Secti	ion IV, Line 3)	=	\$150.00

	Expenditures		
6	Unitemized Expenditures (Less than \$25) # of Expenditures O	+	\$0.00
7	Itemized Expenditures (Total of all Schedule B sheets)	+	\$150.00
8	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+	\$0.00
9	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+	\$0.00
10	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+	\$0.00
(11)	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	=	\$150.00

	Loans, Credit Cards and Debt		
12	Outstanding Balance from previous reporting period	+	\$0.00
13)	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+	\$150.00
14)	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+	\$0.00
15)	Subtotal	=	\$150.00
16)	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	-	\$0.00
17)	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	-	\$0.00
18)	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	=	\$150.00

	Pledged Contributions		
19	Unitemized Pledged Contributions (\$50 and less) # of Pledges O	+	\$0.00
20	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+	\$0.00
21)	Total Pledged Contributions this period	=	\$0.00



Schedule B Itemized Expenditures Twenty-Five Dollars(\$25.00) or more this period

Name of Candidate or Committee:	Michael J Griffin
Reporting Period:	7 Day Pre-Primary

Date	Recipient	Amount	Code	Optional
03/03/2014	State of Idaho PO Box 83720 Boise, ID 83720	\$150.00	G	Explanation: State of Idaho filing fee. Support: Oppose:
	Grand Total:	\$150.00		



Schedule D - Loans

Name of Candidate or Committee:

Reporting Period:

Michael J Griffin

7 Day Pre-Primary

Lender	Previous	Date	Amount	Interest	PmtDate	Payment	Current
Griffin, Michael J 403 Oak St	\$0.00	03/03/2014	\$150.00				\$150.00
Grangeville, ID							
83530							
Grand Total	\$0.00		\$150.00	\$0.00		\$0.00	\$150.00