CAMPAIGN FINANCIAL DISCLOSURE REPORT



SUMMARY PAGE (Please Print or Type) 20 FEB 05 AM 11:46

SECRETARY OF STATE

THE OF				SECILLIAN			
Section I				STATE (OF IDA	HO	
Name of Candidate or Political Committee and Chairperson				Office Sought (if candidate)			istrict (if any)
Sarah A Clendenon Mailing Address		City and Zip		St Senator Home Phone		1 Work Phone	
3988 N Pepperwood Dri	ve	Boise 83704		2085711943		208571	
Name of Political Treasurer Chelsi Goddard						1	
Mailing Address		City and Zip		Home Phone		Work Phone	
11295 W Abram Dr		Boise 83713		2084073911			
Change of address for:	Candidate or Political Committ	tee D Politica	l Treasurer				
This report is for the period from	_	ough <u>12 / 31 /</u>	<u> 2019</u>				
7 Day Pre-Primary R	Report 30) Day Post-Primary Re	port	Octo	ber 10 Pr	re-General F	Report
7 Day Pre-General F	Report 30) Day Post-General Re	port	✓ Annu	al Report	t	
Semi-Annual Report Is this a Termination Report:	(Statewide Candidates Only) Ves No						
	STATEMENT OF tributions or expenditures duri sure to carry forward the appro		d, check the	box next to the s			sign this report.
I hereby cert	ify that I have received no cor	ntributions and have ma	ade no expe	enditures during th	nis reporti	ing period.	
Section IV		SUMMARY					
To reach your Calendar Year to figures to the Column II figures				COLUMN I This Period		COLUMN Calendar \ to Date	Y ear
Line 1: Cash on Hand January	1, This Calendar Year*		\$X	(XXXXX	\$ <u>5</u>	5.03	
Line 2: Enter Beginning Cash I		\$ <u>5.0</u>)3	\$_	XXXXX	<u>X</u>	
Line 3: Total Contributions (En)	\$_0.0	00	\$ <u>(</u>	0.00		
Line 4: Subtotal (Add lines 1, 2		\$ <u>5.0</u>)3	\$ 5	5.03		
Line 5: Total Expenditures (Enter amount from line 11, page 2		2)	\$_5.0)3	\$ 5	5.03	
Line 6: Enter Ending Cash Bala	ance (Subtract line 5 from line	4)	\$ <u>0.0</u>	00	\$ [0.00	
Line 7: Outstanding Debt to Da	ate (Enter amount from line 18	, page 2)	\$_0.0	00			
*This same figure should be er **This is the figure on line 6 of Note: The closing cash balance	the last Campaign Financial D	Disclosure Report filed.					
	Section V						
Return This Report To: Lawerence Denney Secretary of State PO Box 83720	,	si Goddard Name of Political Treasurer	maoiga Ein	, hereby certify			
Boise ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	report is a true, co	emplete and correct Ca		anciai Disclosure al Signature	neport as	s requileu D	y iaw.

Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Sarah A Clendenon

			Total This Period
	Contributions		
1	Unitemized Contributions (\$50 and less) # of Contributors O	+	\$0.00
2	Itemized Contributions (Total of all Schedule A sheets)	+	\$0.00
3	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+	\$0.00
4	Loans (Total of all New Loan amounts from Schedule D sheets)	+	\$0.00
(5)	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	=	\$0.00

	Expenditures	
6	Unitemized Expenditures (Less than \$25) # of Expenditures O	+ \$0.00
7	Itemized Expenditures (Total of all Schedule B sheets)	+ \$5.03
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)	= \$5.03

	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)	+	\$0.00
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	=	\$0.00
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)	=	\$0.00

	Pledged Contributions		
19	Unitemized Pledged Contributions (\$50 and less) # of Pledges O	+	\$0.00
20	,		\$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: Sarah A Clendenon

Reporting Period: First Annual

Date	Recipient	Amount	Code	Optional
12/09/2018	Clendenon, Sarah A	\$5.03	F	Explanation:
	3988 N Pepperwood Dr			Support:
	Boise, ID 83704			Oppose:
	Grand Total:	\$5.03		