CAMPAIGN FINANCIAL DISCLOSURE REPORT



SUMMARY PAGE (Please Print or Type)

19 DEC 30 PM 06:02

Rev. 5/11

SECRETARY OF STATE STATE OF IDAHO

Section i				
Name of Candidate or Political Comm	•		Office Sought (if cand	
Marshall Hurd Coms Mailing Address	SIOCK	City and Zip	St Senator Home Phone	5 Work Phone
932 N Mountain View Ro	d	Moscow 83843	Tione Fronc	WORKT HORE
Name of Political Treasurer Debi G. Dockins			·	
Mailing Address		City and Zip	Home Phone	Work Phone
1320 W Cove Rd		Viola 83872	2088582118	
Change of address for:	Candidate or Political Committe	ee Political 1	reasurer	,
· —	Driginal Amendmen			
This report is for the period from	m <u>01 / 01 / 2019</u> thro	ough <u>12 / 31 / 2</u>	<u></u>	
7 Day Pre-Primary R	leport 30	Day Post-Primary Repo	ort Octol	ber 10 Pre-General Report
7 Day Pre-General R	Report 30	Day Post-General Repo	ort 🔽 Annu	al Report
Semi-Annual Report Is this a Termination Report:	(Statewide Candidates Only) Yes No			
			check the box next to the s	tatement below and sign this report. Section IV.
I hereby cert	ify that I have received no con	tributions and have mad	e no expenditures during th	nis 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	\$ <u>4,239.21</u>
Line 2: Enter Beginning Cash Balance**			\$_4,239.21	\$ XXXXXX
Line 3: Total Contributions (Ent	er amount from line 5, page 2))	\$_0.00	\$ 0.00
Line 4: Subtotal (Add lines 1, 2	and 3)		\$_4,239.21	\$ <u>4,239.21</u>
Line 5: Total Expenditures (Ent	er amount from line 11, page 2	2)	\$_4,239.21	\$ <u>4,239.21</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)	\$_0.00	
*This same figure should be en **This is the figure on line 6 of Note: The closing cash balance	the last Campaign Financial D	isclosure Report filed. If		
	Section V			
Return This Report To:				
Lawerence Denney	ı Dehi	G. Dockins	herehy certify	that the information in this
Secretary of State PO Box 83720		lame of Political Treasurer	, nereby certify	and, the information in this
Boise ID 83720-0080 Phone: (208) 334-2852	report is a true, con	mplete and correct Cam	paign Financial Disclosure	Report as required by law.
Fax: (208) 334-2282			Digital Signature	
			Signature of Political Trea	asurer

DETAILED SUMMARY

Name of Candidate or Committee: Marshall Hurd Comstock

			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)	+	\$4,239.21
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)	=	\$4,239.21

	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	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: Marshall Hurd Comstock

Reporting Period: First Annual

Recipient	Amount	Code	Optional
Davenport Hotel POB Spokane, WA 99201	\$251.64	А	Explanation: Support: Oppose:
Facebook 1601 S California Ave Palo Alto, CA 94304	\$19.58	В	Explanation: Support: Oppose:
NW Cancer Foundation of Hope POB 65 Viola, ID 83872	\$967.99	D	Explanation: Support: Oppose:
Moscow Education Foundation POB Moscow, ID 83843	\$1,000.00	D	Explanation: Support: Oppose:
Palouse Ice Rink POB Moscow, ID 83843	\$1,000.00	D	Explanation: Support: Oppose:
Palouse Cares POB Moscow, ID 83843	\$1,000.00	D	Explanation: Support: Oppose:
	Davenport Hotel POB Spokane, WA 99201 Facebook 1601 S California Ave Palo Alto, CA 94304 NW Cancer Foundation of Hope POB 65 Viola, ID 83872 Moscow Education Foundation POB Moscow, ID 83843 Palouse Ice Rink POB Moscow, ID 83843 Palouse Cares POB Moscow, ID 83843	Davenport Hotel POB Spokane, WA 99201 Facebook 1601 S California Ave Palo Alto, CA 94304 NW Cancer Foundation of Hope POB 65 Viola, ID 83872 Moscow Education Foundation POB Moscow, ID 83843 Palouse Ice Rink POB Moscow, ID 83843 Palouse Cares POB Moscow, ID 83843	Davenport Hotel POB Spokane, WA 99201 Facebook 1601 S California Ave Palo Alto, CA 94304 NW Cancer Foundation of Hope POB 65 Viola, ID 83872 Moscow Education Foundation POB Moscow, ID 83843 Palouse Ice Rink POB Moscow, ID 83843 Palouse Cares POB