

JUN 19 '20 PM 4:09 C-8
IDAHO SECRETARY OF STATE 1/15



REPORT OF ELECTIONEERING COMMUNICATION

For use by a person who has expended \$100 or more per year on electioneering communications.

Any person incurring costs of \$1,000 or more must file within 48 hours of incurring costs.

Name of person/entity Melanie Vander Feev
 Address (Physical) 27823 N. Silver Meadows 100 W City Arden State IN Zip 467801
 Mailing Address _____ City _____ State _____ Zip _____
 Telephone _____

TYPE OF REPORT

- 7 Day Pre-Primary Report 30 Day Post-Primary Report 48 Hour Report
 7 Day Pre-General Report 30 Day Post-General Report

Is this an amended report? No Yes

This amends a previous report filed on _____

Date of Public Distribution(s) 5-6-20 / 6-9-20

Total Expenditures this Statement	\$ <u>728.07</u>
Total Itemized Contributions of \$50 or More this statement	\$
Total Contributions this statement	\$

I Melanie Vander Feev, hereby certify that the information in this
Name of Individual Completing Report
 report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Return This Report To:
 Lawrence Denney
 Secretary of State
 PO Box 83720
 Boise ID 83720-0080
 phone: (208) 334-2852
 fax: (208) 334-2282

Melanie Vander Feev
 Signature of Individual Completing Report
6-16-20
 Date Signed

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Itemized Expenditures for Electioneering Communication

Name of person/entity: Melanie Vander Feer

1. Date Expended <u>4/23/20</u>	3. Name (last, first) <u>Nickels Worth</u>
2. Amount <u>\$ 396.00</u>	4. Address <u>107 N. 5th St</u>
cash <input checked="" type="checkbox"/>	5. City/State/Zip <u>Coeur d'Alene, ID 83814</u>
in-kind <input type="checkbox"/>	6. Method of Communication(s) <u>telephone</u>
	7. Name of Candidate(s) referred to _____
	8. Support <input type="checkbox"/> Oppose <input type="checkbox"/>
	9. Purpose of Expenditure <u>Advertisement</u>

1. Date Expended <u>5/14/20</u>	3. Name (last, first) <u>Upscale mail</u>
2. Amount <u>\$ 332.07</u>	4. Address <u>2600 A E. Settle</u>
cash <input checked="" type="checkbox"/>	5. City/State/Zip <u>Post Falls, ID, 83854</u>
in-kind <input type="checkbox"/>	6. Method of Communication(s) <u>phone</u>
	7. Name of Candidate(s) referred to <u>Steve Vick, Barber, Kastning Whitehead, Henderson, Jorgensen</u>
	8. Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/>
	9. Purpose of Expenditure _____

1. Date Expended <u> / /</u>	3. Name (last, first) _____
2. Amount \$ _____	4. Address _____
cash <input type="checkbox"/>	5. City/State/Zip _____
in-kind <input type="checkbox"/>	6. Method of Communication(s) _____
	7. Name of Candidate(s) referred to _____
	8. Support <input type="checkbox"/> Oppose <input type="checkbox"/>
	9. Purpose of Expenditure _____

1. Date Expended <u> / /</u>	3. Name (last, first) _____
2. Amount \$ _____	4. Address _____
cash <input type="checkbox"/>	5. City/State/Zip _____
in-kind <input type="checkbox"/>	6. Method of Communication(s) _____
	7. Name of Candidate(s) referred to _____
	8. Support <input type="checkbox"/> Oppose <input type="checkbox"/>
	9. Purpose of Expenditure _____

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Itemized Contributions for Electioneering Communication (\$50 or more)

Name of person/entity: Melanie Vander Feer

1. Date Received <u>5/23/20</u>	4. Name (last, first) <u>Melanie Vander Feer</u>
2. Contribution Amount \$ <u>396.00</u>	5. Address <u>27823 N. Silver Meadows Ln.</u>
3. <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	6. City/State/Zip <u>Arhol, ID 83801</u>

1. Date Received <u>5/14/20</u>	4. Name (last, first) <u>Melanie Vander Feer</u>
2. Contribution Amount \$ <u>322.07</u>	5. Address <u>27823 N. Silver Meadows Ln.</u>
3. <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	6. City/State/Zip <u>Arhol, ID 83801</u>

1. Date Received <u> / / </u>	4. Name (last, first) _____
2. Contribution Amount \$ _____	5. Address _____
3. <input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	6. City/State/Zip _____

1. Date Received <u> / / </u>	4. Name (last, first) _____
2. Contribution Amount \$ _____	5. Address _____
3. <input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	6. City/State/Zip _____

1. Date Received <u> / / </u>	4. Name (last, first) _____
2. Contribution Amount \$ _____	5. Address _____
3. <input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	6. City/State/Zip _____