

JUN 19 '20 PM4:09
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 CONRAD WOODALL

Address (Physical) 1614 E TALL TIMBER ^{Loop} City POST FALLS State ID Zip 83854

Mailing Address P.O. Box 7306 City POST FALLS State ID Zip 83877

Telephone 208-416-7019

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) _____

Total Expenditures this Statement	\$ <u>168.71</u>
Total Itemized Contributions of \$50 or More this statement	\$ <u>0</u>
Total Contributions this statement	\$ <u>0</u>

I CONRAD WOODALL 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
 P.O. Box 83720
 Boise ID 83720-0080
 phone: (208) 334-2852
 fax (208) 334-2282

[Signature]
Signature of Individual Completing Report

6-18-20
Date Signed

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Itemized Expenditures for Electioneering Communication

Name of person/entity: CONRAD WOODALL

1. Date Expended <u>5/18/20</u>	3. Name (last, first) <u>UPS SCALE MAIL</u>
2. Amount <u>\$168.71</u>	4. Address <u>2600 A E. SELTICE</u>
cash <input type="checkbox"/>	5. City/State/Zip <u>POST FALLS ID 83854</u>
in-kind <input type="checkbox"/>	6. Method of Communication(s) <u>EMAIL</u>
	7. Name of Candidate(s) referred to <u>KASTNING, WHITEHEAD, HENDERSON, JACOBSON</u>
	8. Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/>
	9. Purpose of Expenditure _____

1. Date Expended _/_/	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 _/_/	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 _/_/	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: _____

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