



REPORT OF ELECTIONEERING COMMUNICATION

APR 28 '22 PM 1:32
IDAHO SECRETARY OF STATE

C-8

For any that incurs cost in excess of \$100 or more on electioneering communications.
Any person incurring costs of **\$1,000 or more must file within 48 hours** of incurring costs. (I.C. 67-6628)

PURPOSE CODES

- | | |
|---|--|
| A All Travel Expenses (Airfare, Fuel, Lodging, & Mileage) | N Newspaper & Other Periodical Advertising |
| B Broadcast Advertising (Radio, TV, Internet, & Telephone) | O Other Advertising (Yard Signs, Buttons, etc.) |
| C Contributions to Candidates & PACs | P Postage |
| D Donations & Gifts | S Surveys & Polls |
| E Event Expenses | T Tickets (Events) |
| F Food & Refreshments | U Utilities |
| G General Operational Expenses | W Wages, Salaries, Benefits, & Bonuses |
| I Interest Accrued & Finance Charges | Y Petition Circulators |
| L Literature, Brochures, Printing | Z Preparation & Production of Advertising |
| M Management Services | |

GENERAL INFORMATION

Name of Person/Entity Responsible for the Communication		Date of Public Distribution	
U.S. Term Limits		5/4/22	
Mailing Address			
Street Address	City	State	Zip Code
2455 Pineda Plaza Way Suite 220	Milbourn	FL	32940

EXPENDITURE INFORMATION

Name of Recipient			
Cold Spark			
Address of Recipient			
Street Address	City	State	Zip Code
307 Fourth Ave. 14th Floor	Pittsboro	PA	15222
Purpose Code	Date of Expenditure	Amount	
L	5/4/22	\$15,273.87	

CERTIFICATION

I, <u>Ashley Bennett</u> , hereby certify that the information in this report is a true, complete and correct <small>(Name of Individual Completing Report)</small>	
Campaign Financial Disclosure Report as required by law.	
Signature of Individual Completing Report	Date Signed
	4/28/22

RETURN THIS FORM TO

Secretary of State
Elections Division
PO Box 83720
Boise, ID 83720-0080

Phone: (208) 334-2852
Fax: (208) 334-2282



ITEMIZED CONTRIBUTIONS FOR ELECTIONEERING COMMUNICATION

For contributions of **\$50 or more.** (I.C. 67-6628)

NAME OF PERSON/ENTITY RESPONSIBLE FOR THE COMMUNICATION

U.S. Term Limits

CONTRIBUTIONS

Date Received	Contributor Name		
	<i>Contributions come from a multitude of donors</i>		
Contribution Amount	Contributor Address		
	Address		
<input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	City	State	Zip Code

Date Received	Contributor Name		
Contribution Amount	Contributor Address		
	Address		
<input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	City	State	Zip Code

Date Received	Contributor Name		
Contribution Amount	Contributor Address		
	Address		
<input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	City	State	Zip Code

Date Received	Contributor Name		
Contribution Amount	Contributor Address		
	Address		
<input type="checkbox"/> Cash <input type="checkbox"/> Loan <input type="checkbox"/> In-Kind	City	State	Zip Code