



REPORT OF ELECTIONEERING COMMUNICATION

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	
Idaho 2nd Amendment Alliance		10-19-2022	
Mailing Address			
Street Address	City	State	Zip Code
10870 W. Fairview Ave. Ste. 102 PMB 329	Boise	ID	83713

EXPENDITURE INFORMATION

Name of Recipient			
Neighborhood Research and Media			
Address of Recipient			
Street Address	City	State	Zip Code
P.O. Box 297	Rodanthe	NC	27968
Purpose Code	Date of Expenditure	Amount	
B	10-23-2022	4995.00	

CERTIFICATION

I, <u>Greg A. Pruett</u> , hereby certify that the information in this report is a true, complete and correct (Name of Individual Completing Report)	
Campaign Financial Disclosure Report as required by law.	
Signature of Individual Completing Report	Date Signed
	10-31-2022

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

CONTRIBUTIONS

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

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



ADDITIONAL ITEMIZED EXPENDITURES FOR ELECTIONEERING COMMUNICATION

NAME OF PERSON/ENTITY RESPONSIBLE FOR THE COMMUNICATION

EXPENDITURES

Date Expended		Name		
Amount	Purpose Code	Address		
		Address		
<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind		City	State	Zip Code

Date Expended		Name		
Amount	Purpose Code	Address		
		Address		
<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind		City	State	Zip Code

Date Expended		Name		
Amount	Purpose Code	Address		
		Address		
<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind		City	State	Zip Code

Date Expended		Name		
Amount	Purpose Code	Address		
		Address		
<input type="checkbox"/> Cash <input type="checkbox"/> In-Kind		City	State	Zip Code