



REPORT OF ELECTIONEERING COMMUNICATION

NOV 1 '22 AM 8:05
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. 67-662B)

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		10/28/22	
Mailing Address			
Street Address	City	State	Zip Code
2955 Pineda Plaza Way, Ste 226	Melbourne	FL	32940

EXPENDITURE INFORMATION

Name of Recipient			
Cold Spark Media			
Address of Recipient			
Street Address	City	State	Zip Code
307 4th Ave 14th FL	Pittsburgh	PA	15222
Purpose Code	Date of Expenditure	Amount	
L, P	10/28/22	\$23,589.33	

CERTIFICATION

I, Nicolas Tombalida, 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
	10/28/22

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

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