



APPOINTMENT AND CERTIFICATION OF POLITICAL TREASURER FOR CANDIDATES AND COMMITTEES

C-1
Rev. 1/15

(Please Print or Type)

Pursuant to Section 67-6603(c1), Idaho Code. No contribution shall be received or expenditure made by or on behalf of a candidate or political committee until he or she appoints a political treasurer and certifies the name and address of the treasurer to the Secretary of State.

Certification is for (check appropriate box below):

<input type="checkbox"/> CANDIDATE:	Name of Candidate:		
	Home Phone:	Work Phone:	Cell Phone:
	Office Sought:	District Number:	Party:
	Candidate Mailing address:		
	Candidate email address:		

<input type="checkbox"/> COMMITTEE:	Name of Committee:		
Party: <input type="checkbox"/>	Name of Committee Chairman:	Party Affiliation (if any):	
Miscellaneous: <input type="checkbox"/>	Home Phone:	Work Phone:	Cell Phone:
Measure: <input type="checkbox"/>	Committee Mailing address:		
Candidate/Measure: <input type="checkbox"/>	Chairman email address:		

CERTIFICATION AND APPOINTMENT

I, _____, do hereby certify and appoint the following individual who is a registered elector of the State of Idaho as the political treasurer for the above named candidate or committee:

Name of Political Treasurer:		
Home Phone:	Work Phone:	Cell Phone:
Treasurer Mailing address:		
Treasurer Residence address:		
Treasurer email address:		

RETURN THIS FORM TO:
Lawrence Denney
Secretary of State
Elections Division
PO Box 83720
Boise, ID 83720-0080
(208) 334-2852
Fax: (208) 334-2282

Signature of Candidate or Committee Chairman

I, _____, do hereby accept the appointment as political treasurer for the above named candidate or committee.

Signature of Political Treasurer



INDEPENDENT EXPENDITURES

C-4
Rev. 1/15

(Please note the definition of independent expenditure and Section 67-6611, Idaho Code - reverse side)

Totaling More Than \$100 Made In Support of or in Opposition to Any One Candidate, Political Committee or Measure

Full Name: _____ Telephone No.: _____

Mailing Address and Zip Code: _____

TYPE OF REPORT

7 Day Pre-Primary Statement

7 Day Pre-General Statement

30 Day Post Primary Statement

30 Day Post-General Statement

Purpose Codes

- B Broadcast Advertising (Radio, TV, Internet & Telephone)
- E Event Expenses
- F Food & Refreshments
- L Literature, Brochures, Printing
- N Newspaper & Other Periodical Advertising
- O Other Advertising (Yard Signs, Buttons, etc.)
- P Postage
- S Surveys & Polls
- Z Preparation & Production of Advertising

ITEMIZED EXPENDITURES IN EXCESS OF FIFTY DOLLARS

Date	Full Name, Mailing Address and Zip Code of Recipient	Candidate/Measure Supported/Opposed	Purpose Code(s)	Amount
____/____/____	1. _____			\$ _____
____/____/____	2. _____			\$ _____
____/____/____	3. _____			\$ _____
____/____/____	4. _____			\$ _____
____/____/____	5. _____			\$ _____

RETURN THIS FORM TO:

Lawrence Denney
Secretary of State
Elections Division
PO Box 83720
Boise, ID 83720-0080
(208) 334-2852
Fax: (208) 334-2282

Total Expenditure(s): \$ _____

I, _____, hereby certify that the information in this report is true, complete and correct.

Signature



48 HOUR NOTICE OF CONTRIBUTIONS / LOANS RECEIVED of \$1,000 or more

C-5
Rev. 01/15

Directions: Use this form to report any contribution of one thousand dollars (\$1,000) or more, received after the sixteenth (16) day before, but more than forty-eight (48) hours before, any primary or general election. Notification must be made within forty-eight (48) hours after receipt of such contribution. (Sec. 67-6607(c), I.C.)

2016 Elections	
48 Hour Notice required for contributions:	
Primary Election	May 2, 2016 through May 14, 2016
General Election	October 24, 2016 through November 5, 2016

This requirement applies to all types of contributions, including but not limited to:

- cash contributions
- in-kind contributions
- loans
- contributions or personal loans made by the candidate

Name of Candidate or Committee:	District (if applicable)
Mailing Address:	
City and Zip Code:	

Date Received	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loan
1. ____/____/____		\$ _____	\$ _____	\$ _____
2. ____/____/____		\$ _____	\$ _____	\$ _____
3. ____/____/____		\$ _____	\$ _____	\$ _____

RETURN THIS FORM TO:
Lawrence Denney
Secretary of State
Elections Division
PO Box 83720
Boise, ID 83720-0080
(208) 334-2852
Fax: (208) 334-2282

I, _____, hereby certify that the information in this
Name of Political Treasurer
 report is a true, complete and correct.

Signature of Political Treasurer



STATEMENT BY A NONBUSINESS ENTITY

C-6
Rev. 1/15

(Type or print clearly)
See instructions at bottom of page

Name and Address of Nonbusiness Entity				
Name	Address	City	State	Zip
_____	_____	_____	_____	_____

Name and Address of Principal Officer or Directors				
Name	Address	City	State	Zip
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List the name and address of each person whose fees, dues, payments or other consideration paid to the nonbusiness entity during either of the prior two (2) calendar years has exceeded \$500; or who is obligated to or has agreed to pay fees, dues, payments or other consideration exceeding \$500 to such entity during the current year.

Name	Address	City	State	Zip
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

INSTRUCTIONS

Who should file this form? Any nonbusiness entity, domiciled in the State of Idaho, which makes expenditures in an amount exceeding one thousand dollars (\$1,000) in any calendar year for the purpose of supporting or opposing one (1) or more candidates or measures. (Please note the definition of nonbusiness entity and Section 67-6606, Idaho Code - reverse side.)

Filing Deadline: This statement shall be filed within thirty (30) days of exceeding the one thousand dollars (\$1,000) threshold.

To Be Filed With:

Lawrence Denney, Secretary of State
PO Box 83720
Boise ID 83720-0080
(208) 334-2852
Fax: (208) 334-2282

Certification: I hereby certify that the information contained herein is a true, complete, and correct statement in accordance with Section 67-6624, Idaho Code.

Signature

Title

Date



INDEPENDENT EXPENDITURES 48 HOUR NOTICE

C-7
Rev. 01/15

(Please note the definition of independent expenditure and Section 67-6611, Idaho Code - reverse side)

Totaling \$1000 or More
Made in Support of or in Opposition to
Any One Candidate, Political Committee or Measure

Full Name: _____ Telephone No.: _____

Mailing Address and Zip Code: _____

2016 Elections

48 Hour Notice required for expenditures made:

Primary Election -- May 2, 2016 through May 14, 2016

General Election -- October 24, 2015 through November 5, 2016

**Purpose
Codes**

- | | |
|---|---|
| B Broadcast Advertising (Radio, TV, Internet & Telephone) | O Other Advertising (Yard Signs, Buttons, etc.) |
| E Event Expenses | P Postage |
| F Food & Refreshments | S Surveys & Polls |
| L Literature, Brochures, Printing | Z Preparation & Production of Advertising |
| N Newspaper & Other Periodical Advertising | |

ITEMIZED EXPENDITURES IN EXCESS OF FIFTY DOLLARS

Date	Full Name, Mailing Address and Zip Code of Recipient	Candidate/Measure Supported/Opposed	Purpose Code	Amount
____/____/____	1. _____			\$ _____
____/____/____	2. _____			\$ _____
____/____/____	3. _____			\$ _____
____/____/____	4. _____			\$ _____
____/____/____	5. _____			\$ _____

RETURN THIS FORM TO:

Lawrence Denney
Secretary of State
Elections Division
PO Box 83720
Boise, ID 83720-0080
(208) 334-2852
Fax: (208) 334-2282

Total Expenditure(s): \$ _____

I, _____, hereby certify that the information in this
Name
report is true, complete and correct.

Signature



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 _____

Address (Physical) _____ City _____ State _____ Zip _____

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) _____

Total Expenditures this Statement	\$
Total Itemized Contributions of \$50 or More this statement	\$
Total Contributions this statement	\$

I _____, 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

Signature of Individual Completing Report

Date Signed

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

Name of person/entity: _____

1. Date Received ____/____/____	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 ____/____/____	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 ____/____/____	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 ____/____/____	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 ____/____/____	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_____

Itemized Expenditures for Electioneering Communication

Name of person/entity: _____

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

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

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

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



**CAMPAIGN FINANCIAL DISCLOSURE REPORT
SUMMARY PAGE
(Please Print or Type)**

C-2
Rev. 12/14

Section I

Name of Candidate or Political Committee and Chairperson		Office Sought (if candidate)	District (if any)
Mailing Address	City and Zip	Home Phone	Work Phone
Name of Political Treasurer			
Mailing Address	City and Zip	Home Phone	Work Phone

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment

This report is for the period from ____/____/____ through ____/____/____.

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
- 7 Day Pre-General Report 30 Day Post-General Report Annual Report
- Semi-Annual Report (Statewide Candidates Only)

Is this a Termination Report: Yes No

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

I hereby certify that I have received no contributions and have made no expenditures during this reporting period.

Section IV

SUMMARY

To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Year*	\$ XXXXXX	\$ _____
Line 2: Enter Beginning Cash Balance**	\$ _____	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ _____	\$ _____
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ _____	\$ _____
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ _____	\$ _____
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ _____	\$ _____
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ _____	\$ _____

*This same figure should be entered on line 1 of all reports filed this calendar year.

**This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.

Note: The closing cash balance for the current reporting period appears on the next report as the beginning cash on hand.

Section V

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

I, _____, hereby certify that the information in this
Name of Political Treasurer
report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee:

		Total This Period
Contributions		
①	Unitemized Contributions (\$50 and less) # of Contributors _____	+ \$
②	Itemized Contributions (Total of all Schedule A sheets)	+ \$
③	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+ \$
④	Loans (Total of all New Loan amounts from Schedule D sheets)	+ \$
⑤	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	= \$

Expenditures		
⑥	Unitemized Expenditures (Less than \$25) # of Expenditures _____	+ \$
⑦	Itemized Expenditures (Total of all Schedule B sheets)	+ \$
⑧	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$
⑨	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+ \$
⑩	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+ \$
⑪	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	= \$

Loans, Credit Cards and Debt		
⑫	Outstanding Balance from previous reporting period	+ \$
⑬	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+ \$
⑭	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+ \$
⑮	Subtotal	= \$
⑯	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	- \$
⑰	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	- \$
⑱	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	= \$

Pledged Contributions		
⑲	Unitemized Pledged Contributions (\$50 and less) # of Pledges _____	+ \$
⑳	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$
㉑	Total Pledged Contributions this period	= \$

SCHEDULE A
ITEMIZED CONTRIBUTIONS
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee:

Date Received	Full Name, Mailing Address and Zip Code of Contributor	Cash or Check
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	1.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	2.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	3.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	4.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	5.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	6.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	7.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	8.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	9.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	10.	\$ _____ \$ _____ Calendar Year-To-Date
Total This Page:		\$ _____

Transfer the combined total of all Schedule A pages to the Detailed Summary on page 2 line 2.

SCHEDULE B
ITEMIZED EXPENDITURES
 Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee: _____

Purpose Codes (Enter up to 3 purpose codes per Expenditure.)

- | | |
|---|---|
| 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 & PAC's | 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 |
| H Independent Expenditures | Y Petition Circulators |
| L Literature, Brochures, Printing | Z Preparation & Production of Advertising |
| M Management Services | |

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code(s)	Cash or Check
1. ____/____/____			\$ _____
2. ____/____/____			\$ _____
3. ____/____/____			\$ _____
4. ____/____/____			\$ _____
5. ____/____/____			\$ _____
6. ____/____/____			\$ _____
7. ____/____/____			\$ _____
8. ____/____/____			\$ _____
9. ____/____/____			\$ _____
10. ____/____/____			\$ _____
Total This Page:			\$ _____

Transfer the combined total of all Schedule B pages to the Detailed Summary on page 2 line 7.

SCHEDULE C

IN-KIND CONTRIBUTIONS and EXPENDITURES

Name of Candidate or Committee:

Purpose Codes (Enter up to 3 purpose codes per Expenditure.)

- | | |
|--|---|
| <p>A All Travel Expenses (Airfare, Fuel, Lodging & Mileage)</p> <p>B Broadcast Advertising (Radio, TV, Internet & Telephone)</p> <p>C Contributions to Candidates & PAC's</p> <p>D Donations & Gifts</p> <p>E Event Expenses</p> <p>F Food & Refreshments</p> <p>G General Operational Expenses</p> <p>H Independent Expenditure</p> <p>L Literature, Brochures, Printing</p> <p>M Management Services</p> | <p>N Newspaper & Other Periodical Advertising</p> <p>O Other Advertising (Yard Signs, Buttons, etc.)</p> <p>P Postage</p> <p>S Surveys & Polls</p> <p>T Tickets (Events)</p> <p>U Utilities</p> <p>W Wages, Salaries, Benefits & Bonuses</p> <p>Y Petition Circulators</p> <p>Z Preparation & Production of Advertising</p> |
|--|---|

1.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;"> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table> </td> <td style="padding: 5px;">Contributor Name, Mailing Address and Zip Code</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Calendar Year-To-Date</td> </tr> </table>	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table>	____/____/____	<input type="checkbox"/> Primary	<input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code	\$ _____		\$ _____		Calendar Year-To-Date		
<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table>	____/____/____	<input type="checkbox"/> Primary	<input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code									
____/____/____													
<input type="checkbox"/> Primary													
<input type="checkbox"/> General													
\$ _____													
\$ _____													
Calendar Year-To-Date													
Expenditure Name, Mailing Address and Zip Code		Purpose Code(s)											
\$ _____													
2.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;"> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table> </td> <td style="padding: 5px;">Contributor Name, Mailing Address and Zip Code</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Calendar Year-To-Date</td> </tr> </table>	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table>	____/____/____	<input type="checkbox"/> Primary	<input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code	\$ _____		\$ _____		Calendar Year-To-Date		
<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table>	____/____/____	<input type="checkbox"/> Primary	<input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code									
____/____/____													
<input type="checkbox"/> Primary													
<input type="checkbox"/> General													
\$ _____													
\$ _____													
Calendar Year-To-Date													
Expenditure Name, Mailing Address and Zip Code		Purpose Code(s)											
\$ _____													
3.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;"> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table> </td> <td style="padding: 5px;">Contributor Name, Mailing Address and Zip Code</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Calendar Year-To-Date</td> </tr> </table>	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table>	____/____/____	<input type="checkbox"/> Primary	<input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code	\$ _____		\$ _____		Calendar Year-To-Date		
<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table>	____/____/____	<input type="checkbox"/> Primary	<input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code									
____/____/____													
<input type="checkbox"/> Primary													
<input type="checkbox"/> General													
\$ _____													
\$ _____													
Calendar Year-To-Date													
Expenditure Name, Mailing Address and Zip Code		Purpose Code(s)											
\$ _____													
4.	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; text-align: center;"> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table> </td> <td style="padding: 5px;">Contributor Name, Mailing Address and Zip Code</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">\$ _____</td> </tr> <tr> <td colspan="2" style="text-align: right;">Calendar Year-To-Date</td> </tr> </table>	<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table>	____/____/____	<input type="checkbox"/> Primary	<input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code	\$ _____		\$ _____		Calendar Year-To-Date		
<table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">____/____/____</td> </tr> <tr> <td><input type="checkbox"/> Primary</td> </tr> <tr> <td><input type="checkbox"/> General</td> </tr> </table>	____/____/____	<input type="checkbox"/> Primary	<input type="checkbox"/> General	Contributor Name, Mailing Address and Zip Code									
____/____/____													
<input type="checkbox"/> Primary													
<input type="checkbox"/> General													
\$ _____													
\$ _____													
Calendar Year-To-Date													
Expenditure Name, Mailing Address and Zip Code		Purpose Code(s)											
\$ _____													
Expenditure Total: (Transfer the combined total of all Expenditures on Schedule C pages to the Detailed Summary, page 2 line 8)		\$ _____											
Contributor Total: (Transfer the combined total of all Contributors on Schedule C pages to the Detailed Summary, page 2 line 3)		\$ _____											

SCHEDULE D - LOANS

Name of Candidate or Committee: _____

Each Lender to your campaign should be listed separately. Each time a loan is received or you loan money to the campaign, it must be listed as a separate item. Each new loan from any Lender must be listed as a new item from that Lender. You may have the same Lender listed more than once. Except for a candidate making a loan to his or her own campaign, loans from any Lender cannot exceed contribution limits laid out in Section 67-6610A, Idaho Code, even if it is repaid in full.

Any loan(s) with a balance(s) appearing on the last report must be listed below with the amount in the Previous Balance column. Any new loan amounts should be listed in the New Loan column. Any interest accrued should be listed in the Interest Accrued column. If a payment was made on the loan, list it in the Repayments column. Note: Any loan that was repaid in full in a previous reporting period does not need to be listed. The Outstanding Balance column is the Previous Balance plus new loans and accrued interest less any repayments.

Name, Mailing Address and Zip Code of Lender (Candidate, Individual or Business)	Previous Balance of loan at the end of the last reporting period	New Loan amount received during this reporting period	Interest accrued during this reporting period	Repayments of Loan during this reporting period	Balance outstanding at the end of this reporting period
1.		Date: _____ Amount: _____ \$ _____		Date: _____ Amount: _____ \$ _____	
2.		Date: _____ Amount: _____ \$ _____		Date: _____ Amount: _____ \$ _____	
3.		Date: _____ Amount: _____ \$ _____		Date: _____ Amount: _____ \$ _____	
4.		Date: _____ Amount: _____ \$ _____		Date: _____ Amount: _____ \$ _____	
5.		Date: _____ Amount: _____ \$ _____		Date: _____ Amount: _____ \$ _____	
6.		Date: _____ Amount: _____ \$ _____		Date: _____ Amount: _____ \$ _____	
7.		Date: _____ Amount: _____ \$ _____		Date: _____ Amount: _____ \$ _____	
	Previous	Received	Interest	Repayments	Ending Balance

Previous Total: \$ _____

Received Total:

(Transfer the combined total of all received loans to the Detailed Summary, page 2 line 4)

\$ _____

Interest Total: \$ _____

Repayments Total:

(Transfer the combined total of all loan repayments to the Detailed Summary, page 2 line 9 & 16)

\$ _____

Ending Balance Total: \$ _____

(NOTE: Transfer the combined total of all Accrued Interest and Received Loans to the Detailed Summary, page 2 line 13)

SCHEDULE E - CREDIT CARDS and DEBT

Name of Candidate or Committee:

Each incurred expense not yet paid (i.e. credit card purchases and debt) should be listed on a separate line. Each time you make purchases with a credit card or incur debt, it is considered to be a separate item. However, you will maintain a single item for each credit card and add purchases to that item. Each Creditor listed below with a New Debt amount must have a Schedule E-1 accompanying it. The Schedule E-1 lists where and when the debt was incurred.

Credit Cards are considered debt to the campaign. Regardless of whether the credit card is repaid when the statement is received, all credit card transactions will appear on Schedule E and E-1. However, only Repayments of Debt during this reporting period appear in the Expenditure Section of the Detailed Summary Page.

Any creditor(s) with a balance(s) appearing on the last report must be listed below with the amount in the Previous Balance column. Any new debt should be listed in the New Debt column, including any accrued interest. If a payment was made on the debt, list it in the Repayments column. Note: Any debt that was repaid in full in a previous reporting period does not need to be listed. The Outstanding Balance column is the Previous Balance plus New Debt less any Repayments of Debt.

Name, Mailing Address and Zip Code of Creditor (Candidate, Individual or Business)	Previous Balance of debt at the end of the last reporting period	New Debt amount incurred during this reporting period	Repayments of Debt during this reporting period	Balance outstanding at the end of this reporting period
1.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
2.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
3.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
4.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
5.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
6.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	

	Previous	Incurred	Repayments	Ending Balance
Previous Total: \$				
(Transfer the combined total of all incurred debt to the Detailed Summary, page 2 line 14)		Incurred Total: \$		
(Transfer the combined total of all debt repayments to the Detailed Summary, page 2 line 10 & 17)			Repayments Total: \$	
			Ending Balance Total: \$	

SCHEDULE E-1 - CREDIT CARD and DEBT ITEMIZATION

Name of Candidate or Committee: _____

Name of Creditor from Schedule E: _____

Each Creditor listed on Schedule E with a New Debt amount must have a Schedule E-1 accompanying it. The Schedule E-1 lists where and when the debt was incurred.

Purpose Codes (Enter up to 3 purpose codes per Expenditure.)

- | | |
|---|---|
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) | M Management Services |
| B Broadcast Advertising (Radio, TV, Internet & Telephone) | N Newspaper & Other Periodical Advertising |
| C Contributions to Candidates & PAC's | O Other Advertising (Yard Signs, Buttons, etc.) |
| D Donations & Gifts | P Postage |
| E Event Expenses | S Surveys & Polls |
| F Food & Refreshments | T Tickets (Events) |
| G General Operational Expenses | U Utilities |
| H Independent Expenditure | W Wages, Salaries, Benefits & Bonuses |
| I Interest Accrued & Finance Charges | Y Petition Circulators |
| L Literature, Brochures, Printing | Z Preparation & Production of Advertising |

Date Incurred	Full Name, Mailing Address and Zip Code of Expenditure	Purpose Code(s)	Amount
____/____/____	1. _____		\$ _____
____/____/____	2. _____		\$ _____
____/____/____	3. _____		\$ _____
____/____/____	4. _____		\$ _____
____/____/____	5. _____		\$ _____
____/____/____	6. _____		\$ _____
____/____/____	7. _____		\$ _____
____/____/____	8. _____		\$ _____
____/____/____	9. _____		\$ _____
Total This Page:			\$ _____

The total of itemization for this creditor should equal the new loan amount listed on Schedule E for this creditor.

SCHEDULE F PLEGGED CONTRIBUTIONS BUT NOT YET RECEIVED

Name of Candidate or Committee:

Directions: Complete this schedule if you were promised and agreed to accept a contribution during this reporting period but have not actually received the money, goods or services offered before the end of the reporting period. Do not include these entries on Schedule A until you actually receive the contribution.

Pledged For	Date Pledged	Full Name, Mailing Address and Zip Code of Contributor	Amount Pledged
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	1.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	2.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	3.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	4.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	5.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	6.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	7.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	8.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	9.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	10.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	/ /	11.	

Total Amount of Pledged Contributions: \$ _____