



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

**Section I**

Name of Candidate or Political Committee and Chairperson <i>John M. Ponsche</i>		Office Sought (if candidate) <i>STATE REP</i>	District (if any) <i>PH 2-D1</i>
Mailing Address <i>1415 27th Ave</i>	<input type="checkbox"/> Check if address change.	City and Zip <i>LEWISTON 83501</i>	Home Phone <i>208-374-1331</i>
Name of Political Treasurer <i>Richard R. Rogwas</i>		Home Phone <i>208-746-2109</i>	Work Phone <i>208-746-2109</i>
Mailing Address <i>2338 14th St</i>	<input type="checkbox"/> Check if address change.	City and Zip <i>LEWISTON 83501</i>	Home Phone <i>208-746-8574</i>
		Home Phone	Work Phone

**Section II**

**TYPE OF REPORT**

Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the instructional manual for reporting periods and due dates.

This report is for the period from 10 / 1 / 04 through 10 / 17 / 04

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report      | <input checked="" type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> Quarterly (April 30)<br>(only filed by ballot measure committees) |
| <input type="checkbox"/> 30 Day Post-Primary Report    | <input type="checkbox"/> 30 Day Post-General Report          | <input type="checkbox"/> Quarterly (July 30)<br>(only filed by ballot measure committees)  |
| <input type="checkbox"/> October 10 Pre-General Report | <input type="checkbox"/> Annual Report                       |  |

Is this Report an amendment?  Yes  No      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, fill in the appropriate dates 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 from \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_.

**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 Year*	\$ XXXXXX	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>15,710.04</u>	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>2,909.52</u>	\$ <u>26,043.81</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>17,809.36</u>	\$ <u>26,043.81</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>7,531.64</u>	\$ <u>15,762.89</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>10,280.92</u>	\$ <u>10,280.92</u>

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

\*\*You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period. Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

**Section V**

**CONTRIBUTIONS PLEDGED - INCURRED EXPENDITURES**

Contributions Pledged during this reporting period but not yet received:  None  \$ \_\_\_\_\_ (see attached Schedule C-2A)  
Incurred Expenditures during this reporting period but not yet paid:  None  \$ \_\_\_\_\_ (see attached Schedule C-2B)

**Section VI**

**CERTIFICATION**

**Return This Report To:**  
Pete T. Cenarrusa  
Secretary of State  
PO Box 83720  
Boise ID 83720-0080  
fax: (208) 334-2282

I Richard R. Rogwas, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

*Richard R. Rogwas*  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <span style="font-size: 1.2em; font-family: cursive;">JOHN Rusche</span>	Report Covering the Period From <span style="font-size: 1.2em; font-family: cursive;">10/1/04</span> to <span style="font-size: 1.2em; font-family: cursive;">10/17/04</span>
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### UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 6
                    
 Total Amount \$ 148.24

### UNITEMIZED EXPENDITURES

Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total Number 5
                    
 Total Amount \$ 80

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <span style="font-size: 1.2em; font-family: cursive;">148.24</span>
Itemized Contributions (total all Schedule A sheets)	\$ <span style="font-size: 1.2em; font-family: cursive;">1954.28</span>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <span style="font-size: 1.2em; font-family: cursive;">2102.52</span>
<u>2</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <span style="font-size: 1.2em; font-family: cursive;">80.00</span>
Itemized Expenditures (total all Schedule B sheets)	\$ <span style="font-size: 1.2em; font-family: cursive;"><del>34</del> 51.64</span>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <span style="font-size: 1.2em; font-family: cursive;">7531.64</span>

7451.64

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

Name of Candidate or Committee JOHN RUSCHE

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
<u>10/1/04</u>	<u>1. JOHN VASSARZ 1622 2<sup>nd</sup> ST Lewiston ID 83501</u>	\$ <u>200<sup>00</sup></u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>10/1/04</u>	<u>2. CWA - COPE PCC 501 3rd ST NW WASHINGTON, DC 20001</u>	\$ <u>200<sup>00</sup></u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>10/7/04</u>	<u>3. CWA - COPE PCC 501 3rd ST NW WASHINGTON, DC 20001</u>	\$ <u>400<sup>00</sup></u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>600<sup>-</sup></u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>10/7/04</u>	<u>4. IDAHO HOSP. ASSOC. PAC PO BOX 1278 BOISE, ID 83701</u>	\$ <u>300<sup>-</sup></u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>10/8/04</u>	<u>5. Todd &amp; Marilyn Blake 1588 S. Viewpoint Dr Lewiston ID 83501</u>	\$ <u>100<sup>-</sup></u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>10/17/04</u>	<u>6. Debi Fitzgerald 221 7th AV Lewiston, ID 83501</u>	\$ <u>100<sup>-</sup></u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>1/1/</u>	<u>7. DONNA Brandmeyer 2202 A Carol Dr Lewiston, ID 83501</u>	\$ <u>100</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>1/1/</u>	<u>8. JOHN RUSCHE 1405 27th AV Lewiston ID 83501</u>	\$ _____	\$ <u>554.28</u>	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>1/1/</u>	<u>9.</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>1/1/</u>	<u>10.</u>	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
Subtotals of Columns A, B & C		\$ <u>1400</u>	\$ <u>554.28</u>	\$ _____
Total This Page (add columns A, B & C)				\$ <u>1954.28</u>

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

Name of Candidate or Committee JOHN RUSCHE

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
10, 1, 04	1. JOHN Rusche 1405 27th AV Lewiston ID 83501	\$ 296 <sup>-</sup>	\$ _____
Purpose of Above Expenditure: <u>Postage</u>			
10, 1, 04	2. BAUB Bussolini 1407 27th AV Lewiston ID	\$ 22 <sup>32</sup>	\$ _____
Purpose of Above Expenditure: <u>Office supplies</u>			
10, 1, 04	3. KOZE 2560 Snake River AV Lewiston 83501	\$ 1033 <sup>-</sup>	\$ _____
Purpose of Above Expenditure: <u>RADIO ADS</u>			
10, 5, 04	4. Pacific Empire Communic 403 C street Lewiston 83501	\$ 999 <sup>80</sup>	\$ _____
Purpose of Above Expenditure: <u>RADIO</u>			
10, 8, 04	5. STEELEY PRINT 201 Cst Lewiston ID	\$ 1022 <sup>50</sup>	\$ _____
Purpose of Above Expenditure: <u>Marketing</u>			
10, 7, 04	6. KLEW 2026 17th St Lewiston ID 83501	\$ 1150 <sup>98</sup>	\$ _____
Purpose of Above Expenditure: <u>TU ADS</u>			
10, 8, 04	7. Cindy Mosher Lewiston ID 83501	\$ 40	\$ _____
Purpose of Above Expenditure: <u>Phone CANVASSING</u>			
10, 11, 04	8. IDA VENT Broadcasting 805 Stewart Lewiston, ID 83501	\$ 1009 <sup>80</sup>	\$ _____
Purpose of Above Expenditure:			
10, 11, 04	9. Post MASTER Lewiston, ID 83501	\$ 188 <sup>74</sup>	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 5762.70	\$ _____
Total This Page (add columns A & B)			\$ 5762.70

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

Name of Candidate or Committee: JOHN RUSCHE

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
10,12,04	1. LEWISTON Morning Tribune. PO Box 957 505 C Street Lewiston, Id 83501	\$ 1078 <sup>00</sup>	\$ _____
Purpose of Above Expenditure:			
10,15,04	2. Charlette Krewer 634 6th Av Lewiston 83501	\$ 55 <sup>04</sup>	\$ _____
Purpose of Above Expenditure: <u>POSTAGE</u>			
10,15,04	3. JOHN Rusche 1405 27th Av	\$ _____	\$ 554.28
Purpose of Above Expenditure: <u>cell phone time - CANVASSING</u>			
___/___/___	4.	\$ _____	\$ _____
Purpose of Above Expenditure:			
___/___/___	5.	\$ _____	\$ _____
Purpose of Above Expenditure:			
___/___/___	6.	\$ _____	\$ _____
Purpose of Above Expenditure:			
___/___/___	7.	\$ _____	\$ _____
Purpose of Above Expenditure:			
___/___/___	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
___/___/___	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 1134 <sup>64</sup>	\$ 554.28
Total This Page (add columns A & B)			\$ 1688.92