

C-2 Rev. 7/97



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

Section I

Form with fields for Name of Candidate (William T. "Bill" Sali), Office Sought (House of Reps - 32nd), District (32nd), Mailing Address (175 Linke Ct), City and Zip (Kuna 83634), Home Phone (922-4865), Work Phone (922-5377), Name of Political Treasurer (Terry Sali), and their respective contact information.

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 01/01/03 through 12/31/03

- Checkboxes for report types: 7 Day Pre-Primary Report, 7 Day Pre-General Report, Quarterly (April 30), 30 Day Post-Primary Report, 30 Day Post-General Report, Quarterly (July 30), October 10 Pre-General Report, Annual Report.

Is this Report an amendment? [ ] Yes [X] 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.

[X] 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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand January 1, Cash Balance at Close of Last Reporting Period, Total Contributions, Subtotal, Total Expenditures, and Cash Balance at Close of Period.

\*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.

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

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

Signature of Political Treasurer

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

**DETAILED SUMMARY PAGE**

Name of Candidate or Committee <b>William T "Bill" Sali</b>	Report Covering the Period From <b>01/01/03</b> to <b>12/31/03</b>
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**UNITEMIZED CONTRIBUTIONS**  
Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 0      Total Amount \$ 0

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

Total Number 7      Total Amount \$ 136.82

	Total This Period
<b>1</b> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>0</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>1150.00</u>
<b>Total Contributions</b> (also enter this figure on page 1, Section IV, line 3)	\$ <u>1150.00</u>
<b>2</b> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>136.82</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>853.02</u>
<b>Total Expenditures</b> (also enter this figure on page 1, Section IV, line 5)	\$ <u>989.84</u>

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

Page 1 of 1

Name of Candidate or Committee  
William T. "Bill" Sali

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
10/7/03 <input type="checkbox"/> Primary <input type="checkbox"/> General	1. Id Dental Political Act. Committee 1230 W. Hays Boise, ID 83702	\$ 200.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/10/03 <input type="checkbox"/> Primary <input type="checkbox"/> General	2. Johnson & Johnson Services, Inc. P.O. Box 16500 New Brunswick, NJ 08904-6500	\$ 200.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
1/20/03 <input type="checkbox"/> Primary <input type="checkbox"/> General	3. Sutherland 2729 Haven Dr Eagle ID 83614	\$ 500.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
8/13/03 <input type="checkbox"/> Primary <input type="checkbox"/> General	4. Idaho Health Care Ass. PAC 822 W. Bannock Suite 304 Boise, ID 83702	\$ 250.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General	5. _____	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General	6. _____	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General	7. _____	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General	8. _____	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General	9. _____	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General	10. _____	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ 1,150.00	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ 1,150.00

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

Name of Candidate or Committee  
William T "Bill" Sali

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A Cash or Check	Column B In-Kind (non-monetary)
1/9/03	1. Inaugural Ball Committy P.O. Box 83720 Boise, ID 83720	\$ 120.00	\$
Purpose of Above Expenditure: <u>tickets</u>			
1/10/03	2. House Caucus fund P.O. Box 83720 Boise, ID 83720	\$ 75.00	\$
Purpose of Above Expenditure: <u>Lounge fee</u>			
1/11/03	3. Tuxedo Place 429 N Millwaukee Boise, ID 83704	\$ 105.89	\$
Purpose of Above Expenditure: <u>Tuxedo rental</u>			
1/21/03	4. NRCC - Fed 735 P.O. Box 90458 Washington, DC 20090-0488	\$ 50.00	\$
Purpose of Above Expenditure: <u>Donation</u>			
3/13/03	5. Wal-mart 2100 12th ave Nampa ID	\$ 42.52	\$
Purpose of Above Expenditure: <u>Office supplies</u>			
7/9/03	6. Terry Sali 175 Linker Ct Kung ID 83634	\$ 52.93	\$
Purpose of Above Expenditure: <u>Reimbursement / 4th of July decor.</u>			
7/21/03	7. wal-mart 2100 12 ave Nampa ID	\$ 27.59	\$
Purpose of Above Expenditure: <u>Food for motorcycle Rally</u>			
7/29/03	8. wal mart 2100 12th ave Nampa, ID	\$ 75.40	\$
Purpose of Above Expenditure: <u>Ink Cartridges</u>			
9/23/03	9. Ada County Republicans 127 E. Broadmere Boise, ID 83702	\$ 100.00	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 649.33	\$
Total This Page (add columns A & B)		\$	\$

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

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Name of Candidate or Committee: William T "Bill" Sali

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
<u>1/20/03</u>	<u>1. Terry Sali 175 Liakie Ct Kuna ID 83634</u>	<u>\$ 203.69</u>	<u>\$ _____</u>
Purpose of Above Expenditure: <u>Phone &amp; Cell phone</u>			
<u>  /  /  </u>	<u>2. _____</u>	<u>\$ _____</u>	<u>\$ _____</u>
Purpose of Above Expenditure: _____			
<u>  /  /  </u>	<u>3. _____</u>	<u>\$ _____</u>	<u>\$ _____</u>
Purpose of Above Expenditure: _____			
<u>  /  /  </u>	<u>4. _____</u>	<u>\$ _____</u>	<u>\$ _____</u>
Purpose of Above Expenditure: _____			
<u>  /  /  </u>	<u>5. _____</u>	<u>\$ _____</u>	<u>\$ _____</u>
Purpose of Above Expenditure: _____			
<u>  /  /  </u>	<u>6. _____</u>	<u>\$ _____</u>	<u>\$ _____</u>
Purpose of Above Expenditure: _____			
<u>  /  /  </u>	<u>7. _____</u>	<u>\$ _____</u>	<u>\$ _____</u>
Purpose of Above Expenditure: _____			
<u>  /  /  </u>	<u>8. _____</u>	<u>\$ _____</u>	<u>\$ _____</u>
Purpose of Above Expenditure: _____			
<u>  /  /  </u>	<u>9. _____</u>	<u>\$ _____</u>	<u>\$ _____</u>
Purpose of Above Expenditure: _____			
Subtotals of Columns A & B		<u>\$ 203.69</u>	<u>\$ _____</u>
Total This Page (add columns A & B)			<u>\$ _____</u>