

C-2 Rev. 06/04



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

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson, Office Sought, District, Mailing Address, City and Zip, Home Phone, Work Phone, Name of Political Treasurer, and Mailing Address, City and Zip, 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 01 / 01 / 05 through 12 / 31 / 05

- 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 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.

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: Line, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand, Cash Balance, Total Contributions, Subtotal, Total Expenditures, Cash Balance at Close of Period, and Outstanding Debt to Date.

*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

CERTIFICATION

I Lori D Rouse 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: Ben Ysursa, Secretary of State, PO Box 83720, Boise ID 83720-0080, phone: (208) 334-2852, fax: (208) 334-2282

DETAILED SUMMARY PAGE

Name of Candidate or Committee Senator John C. Andreason	Report Covering the Period From <u>01 / 01 / 05</u> to <u>12 / 31 / 05</u>
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>1</u>	Total Amount \$ <u>50.00</u>

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>2</u>	Total Amount \$ <u>19.00</u>

	Total This Period
<u>0</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>50.00</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u> </u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>50.00</u>
<u>2</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>19.00</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>6785.62</u>
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ <u> </u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>6804.62</u>
<u>0</u> Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$
Payment this Period (Total all C-2Bs - Payment this Period)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$
<u>0</u> Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$

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

Name of Candidate or Committee
Senator John C. Andreason

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
1/20/05	¹ Max Black 3731 Buckingham Dr. Boise, ID. 83704	\$ 325.00	\$
Purpose of Above Expenditure: Office Materials			
1/30/05	² Janet Cook	\$ 57.50	\$
Purpose of Above Expenditure: Contract Labor			
1/24/05	³ Dance Unlimited 11489 W. Fairview Ave. Boise, ID. 83713	\$ 500.00	\$
Purpose of Above Expenditure: Advertising/Sponsorship			
1/24/05	⁴ John C. Andreason 5120 Mtn. Vw. Dr. Boise, ID. 83704	\$ 1579.52	\$
Purpose of Above Expenditure: Office Supply Reimbursement			
2/14/05	⁵ Ada County Republicans 127 E. Braemere Boise, ID. 83702	\$ 500.00	\$
Purpose of Above Expenditure: Contribution			
2/14/05	⁶ Max Black 3731 Buckingham Dr. Boise, ID. 83704	\$ 100.00	\$
Purpose of Above Expenditure: Contribution			
3/8/05	⁷ Capital H.S. Bond 8055 Goddard Rd. Boise, ID. 83704	\$ 250.00	\$
Purpose of Above Expenditure: Contribution			
8/29/05	⁸ John C. Andreason 5120 Mtn. Vw. Dr. Boise, ID. 83704	\$ 1973.60	\$
Purpose of Above Expenditure: Reimbursement Supplies			
10/26/05	⁹ Keith Johnson 8211 Chesterfield Ave. Boise, ID. 83704	\$ 200.00	\$
Purpose of Above Expenditure: Contribution			
Subtotals of Columns A & B		\$ 5485.62	\$ -0-
Total This Page (add columns A & B)			\$ 5485.62

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

Page 2 of 2

Name of Candidate or Committee
Senator John C. Andreason

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<u>10/27/05</u>	1. <u>Steve Smylie</u> <u>2220 N. Codwater Ave</u> <u>Boise, ID. 83713</u>	<u>\$ 100.00</u>	<u>\$</u>
Purpose of Above Expenditure: <u>Campaign Contribution</u>			
<u>11/18/05</u>	2. <u>Dance Unlimited</u> <u>11489 W. Fairview Ave</u> <u>Boise, ID. 83713</u>	<u>\$ 300.00</u>	<u>\$</u>
Purpose of Above Expenditure: <u>Advertising Sponsorship</u>			
<u>11/18/05</u>	3. <u>Lori Rouse</u> <u>4132 N. Pennfield Pl.</u> <u>Boise, ID. 83713</u>	<u>\$ 900.00</u>	<u>\$</u>
Purpose of Above Expenditure: <u>Treasurer Expenses</u>			
<u> / / </u>	4.	<u>\$</u>	<u>\$</u>
Purpose of Above Expenditure:			
<u> / / </u>	5.	<u>\$</u>	<u>\$</u>
Purpose of Above Expenditure:			
<u> / / </u>	6.	<u>\$</u>	<u>\$</u>
Purpose of Above Expenditure:			
<u> / / </u>	7.	<u>\$</u>	<u>\$</u>
Purpose of Above Expenditure:			
<u> / / </u>	8.	<u>\$</u>	<u>\$</u>
Purpose of Above Expenditure:			
<u> / / </u>	9.	<u>\$</u>	<u>\$</u>
Purpose of Above Expenditure:			
Subtotals of Columns A & B		<u>\$ 1300.00</u>	<u>\$ - 0 -</u>
Total This Page (add columns A & B)		<u>\$ 1300.00</u>	