



### 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:**  
**Ben Ysursa**  
**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 Contribution 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 Contribution for Electioneering Communication (\$50 or more)

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 _____