

C-2
 Rev. 7/97



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

Section I

| | | | |
|---|--|---|-----------------------------------|
| Name of Candidate or Political Committee and Chairperson Tari Jensen | | Office Sought (if candidate) Seat A | District (if any) 29 |
| Mailing Address <input type="checkbox"/> Check if address change. 8294 W Buckskin | | City and Zip Pocatello 83201 | Home Phone 208 233-9227 |
| Name of Political Treasurer (Gus Kelly West) now Tari Jensen | | Home Phone 208 233-9227 | Work Phone 208 238-9300 |
| Mailing Address <input type="checkbox"/> Check if address change. 8294 W Buckskin | | City and Zip Pocatello Idaho | Home Phone 208 233-9227 |
| | | Home Phone 208 233-9227 | Work Phone 208 238-9300 |

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 _____ through _____

- | | | |
|--|--|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report | <input type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> Quarterly (April 30) (only filed by ballot measure committees) |
| <input type="checkbox"/> 30 Day Post-Primary Report | <input checked="" type="checkbox"/> 30 Day Post-General Report | <input type="checkbox"/> Quarterly (July 30) (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 | \$ 0 |
| Line 2: Enter Cash Balance at Close of Last Reporting Period** | \$ 2852.22 | \$ XXXXXX |
| Line 3: Total Contributions (Enter amount from page 2) | \$ 0 | \$ 7995.00 |
| Line 4: Subtotal (Add lines 1, 2 and 3) | \$ 2852.22 | \$ 7995.00 |
| Line 5: Total Expenditures (Enter amount from page 2) | \$ 2852.22 | \$ 7995.00 |
| Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** | \$ 0 | \$ 0 |

*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)

Return This Report To:
 Pete T. Cenarrusa
 Secretary of State
 PO Box 83720
 Boise ID 83728-0880
 fax: (208) 334-2282

Section VI

CERTIFICATION

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

Tari Jensen
 Signature of Political Treasurer

DETAILED SUMMARY PAGE

| | |
|--|---|
| Name of Candidate or Committee <u>Tari L Jensen</u> | Report Covering the Period From ___/___/___ to ___/___/___ |
|--|---|

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 0 Total Amount \$ 0

| | Total This Period |
|--|-------------------|
| <u>0</u> Number of Schedule A pages Attached | |
| Contributions | |
| Unitemized Contributions (\$50 and less) from top of page | \$ <u>0</u> |
| Itemized Contributions (total all Schedule A sheets) | \$ <u>0</u> |
| Total Contributions (also enter this figure on page 1, Section IV, line 3) | \$ <u>0</u> |
| | |
| ___ Number of Schedule B pages Attached | |
| Expenditures | |
| Unitemized Expenditures (less than \$25) from top of page | \$ <u>0</u> |
| Itemized Expenditures (total all Schedule B sheets) | \$ <u>2852.22</u> |
| Total Expenditures (also enter this figure on page 1, Section IV, line 5) | \$ <u>2852.22</u> |

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

Page of

Name of Candidate or Committee
Tari L Jensen

| 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 |
| 1. / / <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date |
| 2. / / <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date |
| 3. / / <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date |
| 4. / / <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date |
| 5. / / <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date |
| 6. / / <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date |
| 7. / / <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date |
| 8. / / <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date |
| 9. / / <input type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date | \$ _____ \$ _____ Calendar Year To Date |
| 10. / / <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 | | \$ _____ | \$ _____ | \$ _____ |
| Total This Page (add columns A, B & C) | | \$ _____ | \$ _____ | \$ _____ |

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

Page of

Name of Candidate or Committee
Tari L Jensen

| Date | Full Name, Mailing Address and Zip Code of Recipient | Column A | Column B |
|--|--|-----------------------|------------------------|
| | | Cash or Check | In-Kind (non-monetary) |
| 10/14/02 | 1. Fed Ex | \$ 17 ⁰⁰ | \$ |
| Purpose of Above Expenditure: <u>overnight brochures to party for absentee ballots</u> | | | |
| 10/30/02 | 2. United States Postal Service | \$ 395 ⁶⁵ | \$ |
| Purpose of Above Expenditure: <u>direct mail postage</u> | | | |
| 11/2/02 | 3. First USA Visa | \$ 69 ¹⁶ | \$ |
| Purpose of Above Expenditure: <u>Stamps for fundraiser mailed Oct 2, 02</u> | | | |
| 11/21/02 | 4. Tari Jensen | \$ 2000 | \$ |
| Purpose of Above Expenditure: <u>Payoff personal loan</u> | | | |
| 11/25/02 | 5. 11/25/02 Bannock County Rep Party | \$ 370 ⁴¹ | \$ |
| Purpose of Above Expenditure: | | | |
| 1/1/ | 6. | \$ | \$ |
| Purpose of Above Expenditure: | | | |
| 1/1/ | 7. | \$ | \$ |
| Purpose of Above Expenditure: | | | |
| 1/1/ | 8. | \$ | \$ |
| Purpose of Above Expenditure: | | | |
| 1/1/ | 9. | \$ | \$ |
| Purpose of Above Expenditure: | | | |
| Subtotals of Columns A & B | | \$ 2852 ⁰² | \$ |
| Total This Page (add columns A & B) | | \$ 2852 ⁰² | \$ |

**SCHEDULE C-2A
 CONTRIBUTIONS PLEDGED BUT NOT YET RECEIVED**

| | |
|--|---|
| Name of Candidate or Committee <u>Tari L Jensen</u> | Report Covering the Period From ___/___/___ to ___/___/___ |
|--|---|

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.

Line 1: Pledged Contributions of \$50.00 or Less This Period: Total Number 0 Total Amount \$ 0

Pledged Contributions of More Than \$50.00 This Period:

| Pledge For | Date of Pledge | Full Name, Mailing Address and Zip Code of Contributor/Lender | 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. | |

Line 2: Total Amount of Pledged Contributions of More Than \$50.00 \$ 0

Line 3: Total Amount of Pledged Contributions of \$50.00 or Less (enter amount from line 1) \$ _____

Line 4: Total Amount of Pledged Contributions this Period (add lines 2 and 3) Also enter this total in Section V, page 1. \$ _____

**SCHEDULE C-2B
 EXPENDITURES INCURRED BUT NOT YET PAID**

| | |
|---|---|
| Name of Candidate or Committee <u>Tari L. Jensen</u> | Report Covering the Period From ___/___/___ to ___/___/___ |
|---|---|

Directions: Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service, but did not make payment before the end of the reporting period. Do not include these entries on Schedule B until you actually make payment.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period: Total Number 0 Total Amount \$ 0

Incurred Expenditures of \$25.00 or More This Period:

| Date Incurred | Full Name, Mailing Address and Zip Code of Recipient | Amount Incurred |
|---|--|-----------------|
| 1. <u> </u> / <u> </u> / <u> </u> | | |
| Purpose of Above Expenditure: | | |
| 2. <u> </u> / <u> </u> / <u> </u> | | |
| Purpose of Above Expenditure: | | |
| 3. <u> </u> / <u> </u> / <u> </u> | | |
| Purpose of Above Expenditure: | | |
| 4. <u> </u> / <u> </u> / <u> </u> | | |
| Purpose of Above Expenditure: | | |
| 5. <u> </u> / <u> </u> / <u> </u> | | |
| Purpose of Above Expenditure: | | |
| 6. <u> </u> / <u> </u> / <u> </u> | | |
| Purpose of Above Expenditure: | | |
| 7. <u> </u> / <u> </u> / <u> </u> | | |
| Purpose of Above Expenditure: | | |
| 8. <u> </u> / <u> </u> / <u> </u> | | |
| Purpose of Above Expenditure: | | |

Line 2: Total Amount of Incurred Expenditures \$25.00 or more \$ _____

Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1) \$ _____

Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Section V, page 1. \$ _____