C-2 Rev. 7/97 CAN	IPAIGN FINANCIAL DISCLOSUR SUMMARY PAGE	E REPORT	
	(Please Print or Type)		
Section I			
Name of Candidate or Political Committee and Chairp	erson /	Office Sought (if candidate)	District (if any)
KOBERT K.	LEE	SEVATE	27
Mailing Address Check if addre	ss change. City and Zip	Home Phone	Work Phone: 00
1330 BARNEY DA	4RUKD. KEXBURG. IS. B34	40 208-356-9506	· · · · · · · · · · · · · · · · · · ·
Name of Political Treasurer	·/····		1 (1 (1)
GWEN J. LEE		SIAL	E UF IDAHO
Mailing Address Check if address	ess change. City and Zip	Home Phone	Work Phone
1330 BARNAY LA	RUKD. REXEWEL, IS. 83440	218-356-9506	i
Section II	TYPE OF REPORT		
Directions: To indicate the type of report be instructional manual for reporting periods an This report is for the period	d due dates.		ox(es). See the Z <i>CCC</i>
This report is for the period		augh & A = -3/3/3/3/3	
Cl 7 Day Pre-Primary Report	Cl 7 Day Pre-General Report	Quarterly (April 30) (only filed by ballot mea	sure committees)
Cl 30 Day Post-Primary Report	□ 30 Day Post-General Report	(only med by ballot med	sure committees)
CI 50 Day 10st-1 linary Report		Cl Quarterly (July 30)	
□ October 10 Pre-General Report	Annual Report	(only filed by ballot mea	sure committees)
Is this Report an amendment?	□ ‡∭• □ [*] Ω Is this	a Termination Report?	¢∭• XNo
Section III STATEME	NT 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.

Cl I hereby certify that I have received no contributions and have made no expenditures during this reporting period from ____/ /____.

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 ICOLUMN IIThis PeriodCalendar Year to Date
Line 1: Cash on Hand January 1, This Year* Line 2: Enter Cash Balance at Close of Last Reporting Period** Line 3: Total Contributions (Enter amount from page 2) Line 4: Subtotal (Add lines 1, 2 and 3) Line 5: Total Expenditures (Enter amount from page 2) Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$

*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	CONTRIBUTION	S PLEDGED - INCU	RRED EXPENDITURES	5
Contributions Pledged	luring this reporting perio	d but not yet received:	⊠None □ \$	(see attached Schedule C-2A)
Incurred Expenditures	during this reporting perio	od but not yet paid:	∫\$A None □ \$	(see attached Schedule C-2B)
				<i>P</i>
Return This Report To: Pete T. Cenarrusa Secretary of State PO Box 83720 Boise ID 83720-0080 fax: (208) 334-2282	Section VI I in this repor required by	iname of Political Treasurer) t is a true, complete and law.	ATIFICATION Correct Campaign Finan Cof Political Treasurer	by certify that the information cial Disclosure Report as

DETAILED SUMMARY PAGE

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Name of Candidate or Committee	Report Covering the Period From Nov 1 18 2000
	IIZED CONTRIBUTIONS Fifty Dollars (\$50.00) or Less This Period
Total Number	D Total Amount \$ Ø
	MIZED EXPENDITURES Than Twenty-Five Dollars (\$25.00) This Period
Total Number	Total Amount § BO

	Τα	tal This Period
Number of Schedule A pages Attached		/
Contributions		
Unitemized Contributions (\$50 and less) from top of page	\$	Ø
Itemized Contributions (total all Schedule A sheets)	\$	O
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$	٥
Number of Schedule B pages Attached		
Expenditures		
Unitemized Expenditures (less than \$25) from top of page	\$	80.00
Itemized Expenditures (total all Schedule B sheets)	\$	80.00
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$	735.97

Page	of

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

Name of Candida	BERT R. LEE			
	DBERT R.LEE	Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
//	1.	\$	\$	\$
Cl Primary Cl General		\$ Calendar Year To Date	\$ Calendar Year To Date	S Calendar Year to Date
	2.	S	\$	\$
Cl Primary		\$	\$	\$
		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
O Primary		<u>\$</u> \$	\$ \$	\$\$
Cl General	4.	Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
• i Primary		<u>\$</u>	\$ \$	\$ \$
General		▶ Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
// □ Primary		5	\$	\$
General		S Calendar Year To Date	S Calendar Year To Date	Calendar Year to Date
_ / _ / _ Cl Primary	-	5	\$	\$
General	1.	S Calendar Year To Date	S Calendar Year To Date	SCalendar Year to Date
		\$	\$	\$
PrimaryGeneral		S Calendar Year To Date	SCalendar Year To Date	SCalendar Year to Date
/_/	3.		 	
□ Primary □ General		S Calendar Year To Date	S Calendar Year To Date	SCalendar Year to Date
_ / _ / _		5	\$	\$
PrimaryGeneral		Calendar Year To Date	S Calendar Year To Date	SCalendar Year to Date
	0.	5	\$	\$
Cl Primary General		Calendar Year To Date	\$Calendar Year To Date	S Calendar Year to Date
	Subtotals of Columns A, B & C	s 0	s	s
1	Total This Page (add columns A, B & C)			0

Page of

· SCHEDULE B ITEMIZED EXPENDITURES

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of Twenty-Five Dollars (\$25.00) or more this period

	Column A	Column B
Full Name, Mailing Address and Zip Code Date of Recipient	Cash or Check	In-Kind (non-monetary)
1. The Poe Adverstising		
1. The Poe Adverstising 155 TAFT PUCATELLO, IDAHO 83201 urpose of Above Expenditure: YARD SIGNS	s 655,97	\$
prose of Above Expenditure: YARD SIGNS		
1_1_	\$	<u>\$</u>
urpose of Above Expenditure:		
3.		
	\$	\$
urpose of Above Expenditure:		
4.		
/ _ / _	\$	\$
urpose of Above Expenditure:		
5.		
	\$	\$
	Ψ	Ψ
urpose of Above Expenditure:	1	1
6.		
Ι_/	\$	<u>_\$</u>
umose of Above Everenditure		
urpose of Above Expenditure: 7		
	¢	¢
	\$	<u>\$</u>
rpose of Above Expenditure:		
8.		
	\$	<u>\$</u>
Irpose of Above Expenditure:		
	\$	\$
urpose of Above Expenditure:		
Subtotals of Columns A & B	s 655.97	\$
Total This Page (add columns A & B)		\$ 655,97