## c-2 Rev. **7/97**



#### CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE

G 4.	
Section	

Return This <b>Report</b> To:				
į	Section VI	CEI	RTIFICATION	
Incurred Expenditures d	uring this reporting	g period but not yet paid:	☑None ☐ 1\$	(see attached Schedule C-2E
_		period but not yet received:		(see attached Schedule C-2A
Section V		IONS PLEDGED - INCU		
*This same figure should be **You must report the cash Note that the closing cash b	on hand at both the alance for the curre	beginning of the reporting pent reporting period appears	period and the close of the on the next report as beg	inning cash on hand.
Line 5: Total Expenditures ( Line 6: Cash Balance at Clos		1 0	\$400.00 \$ \$ 8,723.37	\$400.00 _8,723.37
Line 4: Subtotal (Add lines 1		i pugo 2)	\$ <u>900.00</u> \$ <u>_9.123_37</u>	\$_ <u>4,125_00</u>
Line 2: Enter Cash Balance a Line 3: Total Contributions (			\$ <u>8,223.37</u> \$ <u>900.00</u>	\$ <u> </u>
Line 1: Cash on Hand Januar	•		\$ <u>x x x x x x</u>	\$ <u>7,288.86</u>
Section IV  Fo reach your Calendar Yea  figures to the Column II figu			COLUMN I This Period	COLUMN II Calendar Year to Date
Section IV.	that I have received	d no contributions and have / through	-	-
				ext to the statement below, fill in to Date" figures in Column II,
Section III	STATEMENT	OF NO CONTRIBUTION	NS OR EXPENDITUR	ES
Is this Report ar	amendment?	] \$∭• <b>¾</b> Ø⁵No	Is this a Termination Re	port? □ ‡¶• 🖾 No
October 10 Pre-C	General Report	☐ Annual Report		ballot measure committees)
☐ 30 Day Post-Prima	ary Report	☐ 30 Day Post-General I		
☐ 7 Day Pre-Primary	Report	<b>☎</b> 7 Day Pre-General Re		April 30) ballot measure committees)
instructional manual for repo	orting periods and o			_
Section II Directions: To indicate the t	une of report heins	TYPE OF REPO		propriate hov(es) See the
659 Gifford Av	e	Am. Falls 832	11 226-2409	na
Ann F. Wheeler Mailing Address	☐ Check if address cl	hange. City and Zip	Home Phone	Work Phone
Name of Political Treasurer			SIALL	JE DAG
659 Gifford Av		Am. Falls 832	ent may a	
Ralph "Moon" W Mailing Address	heeler  Check if address ch	nange. City and Zip	OOSING CO	Work Phone
Name of Candidate or Political Co	mmittee and Chairperso	on	Office Sought (if	
Section I				

Secretary of State PO Box 83720 Boise ID 83720-0080 fax: (208) 334-2282

in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Signature of Political Treasurer

### **DETAILED SUMMARY PAGE**

Name of Candidate or Committee	Report Covering the Period			
Ralph "Moon" Wheeler	From 10 / 1 /00 to 10 /22 /00			
UNITEMIZED CONTRIBUTION	NS			
Contributions of Fifty Dollars (\$50.00) or Less Th	his Period			
Total 0 Total 00				
Number Amount \$	<u></u>			
UNITEMIZED EXPENDITURES				
Expenditures of Less Than Twenty-Five Dollars (\$25.0	0) This Period			
Total Total				
Number 0 Amount \$ 0 0				

	Total This Period		
Number of Schedule A pages Attached	1		
Contributions			
Unitemized Contributions (\$50 and less) from top of page	\$ 00		
Itemized Contributions (total all Schedule A sheets)	\$ 900.00		
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 900.00		
Number of Schedule B pages Attached	1		
Expenditures			
Unitemized Expenditures (less than \$25) from top of page	\$ 00		
Itemized Expenditures (total all Schedule B sheets)	\$ 400.00		
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 400.00		

# SCHEDULE A ITEMIZED CONTRIBUTIONS

Page	of
1	1

of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee

Ralph "Moon" Wheeler					
	,	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	
_10/_10_/00	I.Regency Blue Shield POB 1106	\s\ 100.00	\$	\$	
☐ Primary  ☐xGeneral	Lewiston, ID 83501	\$ 100-00 Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date	
<u> 10<sup>/</sup> 10 <sup>/</sup>00</u>	Idaho Health Care FAC 802 West Bannock Ste. 304	\$100.00	\$	\$	
☐ Primary ☑ General	Boise, ID 83702	\$ 100.00 Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date	
10/10/00	BHC Intermaountain Hosp. 303 No. Allumbaugh St	\$ 200.00	\$	\$	
☐ Primary ☐ General	Boise, ID 83704	\$ 200.00 Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date	
<u> 10/10-/00</u>	R.J. Reynolds Corp. POB 2955	\$ 250.00	\$	\$	
☐ Primary ☐ General	Winston-Salem, N.C. 27102	\$ 250.00 Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date	
_10'_10_'00	Coeur d'Alene Mines SO5 Front Ave.	\$ <u>250.00</u>	\$	\$	
☐ Primary ☑ General	Coeur d'Alene, ID 83814	\$ 250.00 Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date	
/	6.	<b>\$</b>	\$	\$	
☐ Primary ☐ General		\$Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date	
	7.	\$	\$	\$	
☐ Primary ☐ General		\$ Calendar Year To Date	\$Calendar Year To Date	Calendar Year to Date	
/ /	8.	\$	\$	\$	
☐ Primary ☐ General		\$ Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date	
/ /	9.	\$	\$	\$	
☐ Primary ☐ General		\$ Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date	
/ /	10.	\$	\$	\$	
• i Primary  General		\$ Calendar Year To Date	\$Calendar Year To Date	\$Calendar Year to Date	
Subtotals of Columns A, B & C \$ 900.00 \$oo \$				\$	
Total This Page (add columns A, B & C)				\$ 900.00	

### SCHEDULE B ITEMIZED EXPENDITURES

Page	of	
1	1	

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

Name of Candidate or Committee					
Ralp"h_Moon_Wheeler					
	Column A	Column B			
Full Name, Mailing Address and Zip Code Of Recipient	Cash or Check	In-Kind (non-monetary)			
Kenneth Allan					
124 Platage, 10-9-000 Pocatello, Idaho 83204	\$ <del>40000</del>	\$			
Purpose of Above Expenditure: Campaign contribution _Senate Candidat	e, Dist 33				
2.					
	\$	\$			
Purpose of Above Expenditure:					
3.					
, ,	\$	\$			
Purpose of Above Expenditure:					
4.					
	\$	\$			
Purpose of Above Expenditure:  5.					
	\$	\$			
/ /	<b>9</b>	φ			
Purpose of Above Expenditure:					
6					
/ /	\$	<u>\$</u>			
Purpose of Above Expenditure:					
7.					
, ,	\$	\$			
Purpose of Above Expenditure:					
8.					
/ <b>i</b>	\$	<u>\$</u>			
Purpose of Above Expenditure:					
9.					
	\$	\$			
Purpose of Above Expenditure:					
Subtotals of Columns A & B	\$_ <del>400.</del> 00	\$			
Total This Page (add columns A & B)	\$ 400.00				