



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

03 JAN 28 PM 3:46
 STATE OF IDAHO

Section I

Name of Candidate or Political Committee and Chairperson <i>Lita For Senate (Carol Little)</i>		Office sought (if candidate) <i>Senate</i>	District (if applicable) <i>Dist 46</i>
Mailing Address <i>Box 488</i>	<input type="checkbox"/> Check if address change.	City and Zip <i>Emmett 83617</i>	Home Phone <i>365-4611</i>
Name of Political Treasurer <i>Tom Johnston</i>		Home Phone	Work Phone <i>365-770</i>
Mailing Address <i>22410 Ten Skin Rd</i>	<input type="checkbox"/> Check if address change.	City and Zip <i>Parma 83660</i>	Home Phone <i>722-6224</i>
			Work Phone <i>NA</i>

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 11/15/02 through 12/31/02

- | | | |
|--|---|--|
| <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 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 checked="" 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*	\$ <u>XXXXXX</u>	\$ <u>9500</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>5775.53</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>0</u>	\$ <u>14740</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>5775.53</u>	\$ <u>15690</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>101</u>	\$ <u>10015.47</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>5674.53</u>	\$ <u>5674.53</u>

*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 83720-0080
 fax: (208) 334-3282

Section VI

CERTIFICATION

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

Tom Johnston
 Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee <u>Brad Little</u>	Report Covering the Period From <u>11 / 16 / 02</u> to <u>12 / 31 / 02</u>
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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 1 Total Amount \$ 100

	Total This Period
<u>0</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 0
Itemized Contributions (total all Schedule A sheets)	\$ 0
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 0
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 100
Itemized Expenditures (total all Schedule B sheets)	\$ 0
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 100

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

Name of Candidate or Committee
Little for Senate Brod Little

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
<i>12/13/02</i>	<i>1. Gingers Restaurant Caldwell, ID</i>	<i>\$ 100⁰⁰</i>	<i>\$ _____</i>
Purpose of Above Expenditure: <i>Party for County Central Committee</i>			
<i> / / </i>	<i>2. _____</i>	<i>\$ _____</i>	<i>\$ _____</i>
Purpose of Above Expenditure:			
<i> / / </i>	<i>3. _____</i>	<i>\$ _____</i>	<i>\$ _____</i>
Purpose of Above Expenditure:			
<i> / / </i>	<i>4. _____</i>	<i>\$ _____</i>	<i>\$ _____</i>
Purpose of Above Expenditure:			
<i> / / </i>	<i>5. _____</i>	<i>\$ _____</i>	<i>\$ _____</i>
Purpose of Above Expenditure:			
<i> / / </i>	<i>6. _____</i>	<i>\$ _____</i>	<i>\$ _____</i>
Purpose of Above Expenditure:			
<i> / / </i>	<i>7. _____</i>	<i>\$ _____</i>	<i>\$ _____</i>
Purpose of Above Expenditure:			
<i> / / </i>	<i>8. _____</i>	<i>\$ _____</i>	<i>\$ _____</i>
Purpose of Above Expenditure:			
<i> / / </i>	<i>9. _____</i>	<i>\$ _____</i>	<i>\$ _____</i>
Purpose of Above Expenditure:			
Subtotals of Columns A & B		<i>\$ 100⁰⁰</i>	<i>\$ _____</i>
Total This Page (add columns A & B)			<i>\$ 100⁰⁰</i>