



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

02 OCT 23 PM 5:11

**Section I**

Name of Candidate or Political Committee and Chairperson <b>Committee To Elect HAY BUNDERSON</b>		Office Sought (if candidate) <b>SENATE</b>	District (if any) <b>SENATE</b>
Mailing Address <b>532 RIVER HEIGHTS</b>	City and Zip <b>MERIDIAN 83642</b>	Home Phone <b>888-7156</b>	Work Phone <b>888-7156</b>
Name of Political Treasurer <b>KEID OLSEN</b>			
Mailing Address <b>131 SW 5<sup>TH</sup> AVE Ste B</b>	City and Zip <b>MERIDIAN 83642</b>	Home Phone <b>888-3258</b>	Work Phone <b>888-1595</b>

**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 10 / 01 / 02 through 10 / 20 / 02

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report      | <input checked="" type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> Quarterly (April 30)<br>(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)<br>(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	\$ 7672.19
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 8467.39	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 4400.00	\$ 13550.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 12867.39	\$ 21222.19
Line 5: Total Expenditures (Enter amount from page 2)	\$ 1038.20	\$ 9393.00
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 11,829.19	\$ 11829.19

\*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) 334-2282

**Section VI**

**CERTIFICATION**

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

*Keid Olsen*  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee	Report Covering the Period From <u>10/01/02</u> to <u>10/20/02</u>
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<b>UNITEMIZED CONTRIBUTIONS</b>	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>0</u>	Total Amount \$ <u>0</u>

<b>UNITEMIZED EXPENDITURES</b>	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>1</u>	Total Amount \$ <u>12.33</u>

	Total This Period
<u>2</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>0</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>4400.00</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>4400.00</u>
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>12.33</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>1025.87</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>1038.20</u>

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

Name of Candidate or Committee  
COMMITTEE TO ELECT HAL BLUNDERSON

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
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	1. AMALGAMATED SUGAR PAC PO BOX 1820 OGDEN UT 84402	\$ <u>100<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	2. AGRICULTURE + NATURAL RESOURCES PAC 5605 PARAPET CRT BOISE ID 83703	\$ <u>100<sup>00</sup></u> \$ <u>200<sup>00</sup></u> Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	3. CEDRON/TEXACO PO BOX 9084 CONCORD, CA 94524	\$ <u>250<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	4. IDAHO ASSOC OF REACTORS PAC 1450 W BANNOCK BOISE ID 83702	\$ <u>750<sup>00</sup></u> \$ <u>1750<sup>00</sup></u> Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	5. AMERICAN INSURANCE ASSOC PAC - IDAHO 980 9th St. Ste 2060 SACRAMENTO, CA 95614	\$ <u>100<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	6. IDAHO SUGAR BEET GROWERS 1199 MAIN ST BOISE ID 83702	\$ <u>250<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	7. REFERENCE BLUE SALVAD PO BOX 11166 LEWISTON, ID 83301	\$ <u>100<sup>00</sup></u> \$ <u>200<sup>00</sup></u> Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	8. HOME PAC PO BOX 195088 BOISE, ID 83719	\$ <u>250<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	9. IDAHO HEALTH CARE ASSOC PAC 802 W. BANNOCK #304 BOISE ID 83702	\$ <u>200<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	10. IDAHO SOFT DRINK PAC 600 E OVERLAND MERIDIAN 83642	\$ <u>250<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ <u>2350<sup>00</sup></u>	\$ <u>0</u>	\$ <u>0</u>
Total This Page (add columns A, B & C)		\$ <u>2350<sup>00</sup></u>		

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

Name of Candidate or Committee  
COMMITTEE TO ELECT HAL BUNDERSON

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
<u>10/03/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>1. IDAHO POWER</u> <u>PO BOX 70</u> <u>BOISE ID 83707</u>	\$ <u>500<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/18/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>2. ROY EIGUREN</u> <u>ATTN ATLAN</u> <u>277 N 6TH ST</u> <u>BOISE ID 83702</u>	\$ <u>100<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/18/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>3. IDABANK PAC STATE FUND</u> <u>PO BOX 838</u> <u>BOISE ID 83701</u>	\$ <u>100<sup>00</sup></u> \$ <u>200<sup>00</sup></u> Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/18/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>4. CROWN PAC</u> <u>PO BOX 5756</u> <u>BOISE ID 83705</u>	\$ <u>100<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/18/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>5. IDAHO ASSOC OF CHIROPRACTIC PHYS</u> <u>PAC</u> <u>BOX 1863</u> <u>BOISE ID 83701</u>	\$ <u>50<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/18/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>6. CORRECTIONS CORP OF AMERICA</u> <u>10 BURTON HILLS BLVD</u> <u>NASHVILLE, TN 37216</u>	\$ <u>250<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/18/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>7. IDAHO CABLE TELECOMMUNICATIONS</u> <u>PAC FUND</u> <u>PO BOX 1146</u> <u>BOISE ID 83701</u>	\$ <u>400<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/18/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>8. CRAFT FOR US SENATE</u> <u>PO BOX 1948</u> <u>BOISE ID 83701</u>	\$ <u>300<sup>00</sup></u> \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/18/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>9. BOISE CASCADE CORP</u> <u>P.O. BOX 50</u> <u>BOISE ID 83728-0001</u>	\$ <u>250<sup>00</sup></u> \$ <u>500<sup>00</sup></u> Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
<u>10/18/02</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	<u>10.</u>	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ <u>2050.00</u>	\$ _____	\$ _____
Total This Page (add columns A, B & C)		\$ <u>2050<sup>00</sup></u>		

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

Name of Candidate or Committee  
Committee To Elect Hal Bunderson

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
10/9/02	1. LOUES 7990 W OVERLAND BOISE ID 83709	\$ 25 <sup>87</sup>	\$
Purpose of Above Expenditure: <u>SIGN MATERIALS</u>			
10/15/02	2. Com to Elect Kent Kunz, Senate 128 Fairway Circle Pocatello, ID 83201	\$ 1,000 <sup>00</sup>	\$
Purpose of Above Expenditure: <u>Political Contribution</u>			
___/___/___	3.	\$	\$
Purpose of Above Expenditure:			
___/___/___	4.	\$	\$
Purpose of Above Expenditure:			
___/___/___	5.	\$	\$
Purpose of Above Expenditure:			
___/___/___	6.	\$	\$
Purpose of Above Expenditure:			
___/___/___	7.	\$	\$
Purpose of Above Expenditure:			
___/___/___	8.	\$	\$
Purpose of Above Expenditure:			
___/___/___	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 1025.87	\$
Total This Page (add columns A & B)			\$ 1025.87