



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

Section I

Name of Candidate or Political Committee and Chairperson KEN ROBERTS		Office Sought (if candidate) REPRESENTATIVE	District (if any) 8A
Mailing Address <input type="checkbox"/> Check if address change. 12765 HWY 55	City and Zip DONNELLY ID. 83615	Home Phone 325-8351	Work Phone 325-8351
Name of Political Treasurer MARY JO ROBERTS			
Mailing Address <input type="checkbox"/> Check if address change. 12765 HWY 55	City and Zip DONNELLY ID. 83615	Home Phone 325-8351	Work Phone 325-8351

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 / 21 / 02 through 11 / 15 / 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 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	\$ <u>624.39</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>3588.97</u>	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>550.00</u>	\$ <u>5,531.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>4,138.97</u>	\$ <u>6,155.39</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>1,125.25</u>	\$ <u>3,141.67</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>3,013.72</u>	\$ <u>3,013.72</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 \$ 2,959¹⁵ (see attached Schedule C-2B)

Section VI

CERTIFICATION

Return This Report To:
Pete T. Cenarrusa
Secretary of State
PO Box 83720
Boise ID 83720-0080
fax: (208) 334-2282

I MARY JO ROBERTS, hereby certify that the information
(name of Political Treasurer)
 in this report is a true, complete and correct Campaign Financial Disclosure Report as
 required by law.

Mary Jo Roberts

 Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee KEN ROBERTS	Report Covering the Period From <u>10 / 21 / 02</u> to <u>11 / 15 / 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 0 Total Amount \$ 0

	Total This Period
<u>1</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>550⁰⁰</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>550⁰⁰</u>
<u>1</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>1,125²⁵</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>1,125²⁵</u>

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

Name of Candidate or Committee
KEN ROBERTS

		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
<u>10/22/02</u>	1. LYDIA EDWARDS P.O. BOX 35	\$ <u>200⁰⁰</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	DONNELLY ID. 83616	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>10/28/02</u>	2. EMPLOYERS RESOURCE 1301 S. VISTA AVE.	\$ <u>100⁰⁰</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	BOISE, ID. 83705	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u>11/03/02</u>	3. PHILIP MORRIS 8922 S. RIDGE BLVD.	\$ <u>250⁰⁰</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	HIGHLANDS RANCH CO. 80129	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	4.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	5.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
<u> / / </u>	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

Name of Candidate or Committee
KEN ROBERTS

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10/25/02	1. WHISTLE PUNK. 1000 FIRST ST. MCCALL, ID. 83638	\$ 1,125 ²⁵	\$ _____
Purpose of Above Expenditure:			
____/____/____	2.	\$ _____	\$ _____
Purpose of Above Expenditure:			
____/____/____	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		\$ 1,125 ²⁵	\$ _____
Total This Page (add columns A & B)			\$ 1,125 ²⁵

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

Name of Candidate or Committee KEN ROBERTS	Report Covering the Period From 10 / 21 / 02 to 11 / 15 / 02
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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
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Incurred Expenditures of \$25.00 or More This Period:

Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	Amount Incurred
<u>10 / 25 / 02</u>	1. USAA FEDERAL SAVINGS BANK CREDIT CARD.	2,959.15
Purpose of Above Expenditure: TONER CARTRIDGES, PRINTING, PAPER, STAMPS		
/ /	2.	
Purpose of Above Expenditure:		
/ /	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:		

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

\$ ~~0~~

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

\$ **2,959.15**

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

\$ **2,959.15**