



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

Section I

Name of Candidate or Political Committee and Chairperson <i>William K. Chishelm</i>		Office Sought (if candidate) <i>Senate</i>	District (if any) <i>23</i>
Mailing Address <input type="checkbox"/> Check if address change. <i>19073 Highway 30</i>	City and Zip <i>Buhl 83316</i>	Home Phone <i>543-448879</i>	Work Phone <i>same</i>
Name of Political Treasurer <i>Helen M. McCracken</i>		STATE	
Mailing Address <input type="checkbox"/> Check if address change. <i>P.O. Box AE</i>	City and Zip <i>Filer, ID</i>	Home Phone <i>326-5696</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 ___/___/___ through ___/___/___

- | | | |
|--|--|--|
| <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	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 1056.50	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ -0-	\$ 6555.50
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 1056.50	\$ 6555.50
Line 5: Total Expenditures (Enter amount from page 2)	\$ 1296.29	\$ 6795.29
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ (239.79)	\$ (239.79)

*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)

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

Helen M. McCracken
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee Chishelm For Senate	Report Covering the Period From 10/29/02 to 12/03/02
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UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 0	Total Amount \$ 0
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UNITEMIZED EXPENDITURES

Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total Number 0	Total Amount \$ 0
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	Total This Period
____ 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
____ Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 0
Itemized Expenditures (total all Schedule B sheets) <i>(see Addendum)</i>	\$ 1296.29
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 1296.29

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

Name of Candidate or Committee
Chisholm for Senate

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<u>10/30/02</u>	^{1.} <u>Times News</u> <u>P.O. Box 548, 131 3rd Street West</u> <u>Twin Falls, ID 83301</u>	<u>\$ 444.00</u>	\$ _____
Purpose of Above Expenditure: <u>Advertising</u>			
<u>11/3/02</u>	^{2.} <u>Tomatoes</u> <u>1301 Blue Lakes Blvd. North</u> <u>Twin Falls, ID 83301</u>	<u>\$ 27.00</u>	\$ _____
Purpose of Above Expenditure:			
<u>11/10/02</u>	^{3.} <u>Valerie Chisholm</u> <u>19073 Highway 30</u> <u>Buhl, ID 83316</u>	<u>\$ 69.74</u>	\$ _____
Purpose of Above Expenditure:			
<u>1/1/</u>	^{4.} <u>see attached Addendum</u> <u>re mileage</u>	<u>\$ 755.55</u>	\$ _____
Purpose of Above Expenditure:			
<u>1/1/</u>	^{5.}	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>1/1/</u>	^{6.}	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>1/1/</u>	^{7.}	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>1/1/</u>	^{8.}	\$ _____	\$ _____
Purpose of Above Expenditure:			
<u>1/1/</u>	^{9.}	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		<u>\$ 1296.29</u>	<u>\$ 0</u>
Total This Page (add columns A & B)		<u>\$ 1296.29</u>	

see attached Addendum

**ADDENDUM TO SCHEDULE B
ITEMIZED EXPENDITURES**

Itemization of No. 4, Schedule B:

The following mileage expenses were incurred by candidate, but never claimed timely by candidate. Candidate is statutorily entitled to reimbursement from unexpended campaign contribution funds. Such reimbursement results in a negative balance; i.e. more funds expended than received.

Candidate's Name and Address:

William K. Chisholm
19073 Highway 30
Buhl, ID 83316

Date Incurred, Purpose, Mileage x .345 and Total:

6-27-02; Buhl to purchase ad; 20 x .345 = \$6.90
 7-01-02; Homedale to set up ad; 280 x .345 = \$96.60
 7-10-02; Twin Falls to pick up brochures; 60 x .345 = \$20.70
 8-01-02; Buhl & Twin Falls for ads; 60 x .345 = \$20.70
 9-10-02; Buhl to purchase as; 20 x .345 = \$6.90
 9-16-02; Homedale for ad and campaign stops; 280 x .345 = \$96.60
 9-17-02; Twin Falls for ads; 60 x .345 = \$20.70
 9-24-02; Homedale to attend rally against closing of Welfare Office; 280 x .345 = \$96.60
 10-02-02; Twin Falls to pick up bumper stickers; 60 x .345 = \$20.70
 10-11-02; Twin Falls for debate at Alternative School; 60 x .345 = \$20.70
 10-15-02; Twin Falls for Home Builders Forum; 60 x .345 = \$20.70
 10-17-02; Twin Falls for Chamber of Commerce debate; 60 x .345 = \$20.70
 10-26-02; Twin Falls for Sierra Club Forum; 60 x .345 = \$20.70
 10-29-02; Twin Falls; distributing leaflets; 100 x .345 = \$34.50
 10-30-02; Twin Falls; Meeting with Twin Falls Med. Assn.; 60 x .345 = \$20.70
 10-31-02; Twin Falls; distributing leaflets; 90 x .345 = \$31.05
 11-01-02; Campaign trip through Owyhee County (Duck Valley to Homedale) 400 x .345 = \$138.00
 11-02-02; Twin Falls; distributing leaflets; 120 x .345 = \$41.40
 11-03-02; Twin Falls; lunch for volunteers at Tomatoes; 60 x .345 = \$20.70

TOTAL -----\$755.55

000.....	0. *	6.90 +	96.60 +	20.70 +	20.70 +	6.90 +	96.60 +	20.70 +	96.60 +	20.70 +	20.70 +	20.70 +	20.70 +	20.70 +	34.50 +	20.70 +	31.05 +	138.00 +	41.40 +	20.70 +	019.....	755.55 *
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