

SCANNED

**POSTED**

C-2  
Rev. 04/04



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

**Section I**

Name of Candidate or Political Committee and Chairperson <b>Dean L. Cameron</b>		Office Sought (if candidate) <b>State Senate</b>	District (if any) <b>26</b>
Mailing Address <b>1101 Ruby Drive</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>Rupert, 83350</b>	Home Phone <b>436-5624</b>
Name of Political Treasurer <b>S. Todd Seamons</b>		Home Phone <b>436-4135</b>	Work Phone <b>436-4424</b>
Mailing Address <b>P.O. Box 824</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>Rupert, 83350</b>	Work Phone <b>436-4424</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 11 / 13 / 04 through 12 / 31 / 04

- 7 Day Pre-Primary Report       30 Day Post-Primary Report       October 10 Pre-General Report
- 7 Day Pre-General Report       30 Day Post-General Report       Annual Report
- Semi-Annual Report (Statewide Candidates Only)

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	\$ 1,111.60
Line 2: Enter Cash Balance at Close of Last Reporting Period** <i>6099.30</i>	\$ <del>6,000.00</del>	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2) <i>1471.79</i>	\$ <del>1,271.79</del>	\$ <del>13,466.79</del> <i>13366.79</i>
Line 4: Subtotal (Add lines 1, 2 and 3) <i>7571.09</i>	\$ <del>7,071.09</del>	\$ <del>14,578.39</del> <i>14478.39</i>
Line 5: Total Expenditures (Enter amount from page 2)	\$ 2,746.75	\$ 9,654.05
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4) <i>4824.34</i>	\$ <del>4,924.34</del>	\$ <del>4,924.84</del> <i>4824.34</i>
Line 7: Outstanding Debt to Date	\$ 0.00	

\*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.

Return This Report To:  
Ben Ysursa  
Secretary of State  
PO Box 83720  
 Boise ID 83720-0080  
 phone: (208) 334-2852  
 fax: (208) 334-2282

**Section V**

**CERTIFICATION**

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

*S. Todd Seamons*  
Signature of Political Treasurer

**DETAILED SUMMARY PAGE**

Name of Candidate or Committee <b>Dean L. Cameron</b>	Report Covering the Period From <u>11 / 13 / 04</u> to <u>12 / 31 / 04</u>
--	---

<b>UNITEMIZED CONTRIBUTIONS</b>	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>1</u>	Total Amount \$ <u>21.79</u>

<b>UNITEMIZED EXPENDITURES</b>	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>0</u>	Total Amount \$ <u>0.00</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ 21.79
Itemized Contributions (total all Schedule A sheets)	\$ <del>4,250.00</del> <b>1450.00</b>
<b>Total Contributions (also enter this figure on page 1, Section IV, line 3)</b>	<b>\$ <del>1,271.79</del> 1471.79</b>
<u>2</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 0.00
Itemized Expenditures (total all Schedule B sheets)	\$ 2,746.75
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0.00
<b>Total Expenditures (also enter this figure on page 1, Section IV, line 5)</b>	<b>\$ 2,746.75</b>
<u>0</u> Number of Schedule C-2B pages Attached	
<b>Incurred Expenditures</b>	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$
Payment this Period (Total all C-2Bs - Payment this Period)	- \$
<b>Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)</b>	<b>= \$</b>
<u>0</u> Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	
Amount Pledged this Period	\$

## SCHEDULE A ITEMIZED CONTRIBUTIONS

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

Name of Candidate or Committee  
Dean L. Cameron

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A Cash or Check	Column B In-Kind (non-monetary)	Column C Loans
12 / 8 / 04	1. Id. Veterinary Medical Assoc. 346 W. 4th St. Kuna, Id 83634	\$ 500.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
12 / 20 / 04	2. Idaho Waste Systems, Inc. 222 SE Salmon Ave. Redmond, OR 97756	\$ 250.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
12 / 31 / 04	3. Employers Resource Group 9790 Gateway Dr. Reno, NV 89521	\$ 500.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11 / 13 / 04	4. Idaho Health Care PAC Boice	\$ 200.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
/ /	5.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
/ /	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
/ /	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
/ /	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
/ /	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ <del>4,250.00</del>	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)		\$ 1450.00		\$ <del>4,250.00</del>

4-14-05  
as per  
P. 7.

1450.00

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

Page	of
1	2

Name of Candidate or Committee  
**Dean L. Cameron**

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10 / 26 / 04	<sup>1.</sup> United States Postal Service Rupert MPO Rupert, ID 83350-9998	\$ 77.85	\$ _____
Purpose of Above Expenditure: Mailing/Election night party			
11 / 10 / 04	<sup>2.</sup> Minico High School 100 S 292 W Rupert, ID 83350	\$ 575.00	\$ _____
Purpose of Above Expenditure: Business Club Advertising			
11 / 11 / 04	<sup>3.</sup> Burley Inn 800 N. Overland Ave. Burley, ID 83318	\$ 308.84	\$ _____
Purpose of Above Expenditure: Election Night party			
11 / 24 / 04	<sup>4.</sup> Christmas Lighting Committe Rupert, ID 83350	\$ 100.00	\$ _____
Purpose of Above Expenditure: Donation/Advertising			
11 / 26 / 04	<sup>5.</sup> Minidoka Memorial Health Care Foundation 1224 8th Street Rupert, ID 83350	\$ 900.00	\$ _____
Purpose of Above Expenditure: Advertising/Donation			
11 / 30 / 04	<sup>6.</sup> The Bookstore P.O. Box 516 Rupert, ID 83350	\$ 112.52	\$ _____
Purpose of Above Expenditure: Supplies-for the Session			
Subtotals of Columns A & B		\$ 2,072.31	\$ 0.00
Total This Page (add columns A & B)			\$ 2,072.31

**SCHEDULE B  
ITEMIZED EXPENDITURES**

Page	of
2	2

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

Name of Candidate or Committee  
**Dean L. Cameron**

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
12 / 14 / 04	1. US Postal Service Rupert MPO Rupert, ID 83350	\$ 148.00	\$ _____
Purpose of Above Expenditure: Christmas Card postage			
12 / 18 / 04	2. Cal Store Overland Ave. Burley, ID 83318	\$ 126.44	\$ _____
Purpose of Above Expenditure: Christmas Cards			
12 / 27 / 04	3. Mini Cassia Chamber P.O. Box 640 Heyburn, ID 83336	\$ 150.00	\$ _____
Purpose of Above Expenditure: Advertising/Donation			
12 / 27 / 04	4. The Bookstore P.O. Box 516 Rupert, Id 83350	\$ 250.00	\$ _____
Purpose of Above Expenditure: Presentation material-Paper,Printer Cartridge,Binders			
/ /	5.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	6.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 674.44	\$ 0.00
Total This Page (add columns A & B)			\$ 674.44