

C-2 Rev. 06/04



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

04 DEC -2 PM 2:33

Section I

Form for candidate information including Name of Candidate (Peter Nielsen), Office Sought (Representative), District (122-B), Mailing Address (3955 S. 136 W.), City and Zip (Mountain Home, 83647), Home Phone (208 832 4352), and Work Phone (208 832 4382).

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 / 18 / 2004 through 11 / 12 / 2004

- Checkboxes for report types: 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 [x] No Is this a Termination Report? [] Yes [x] 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.

[x] 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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand, Cash Balance, Total Contributions, Subtotal, Total Expenditures, Cash Balance at Close of Period, and Outstanding Debt.

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

Signature of Political Treasurer: Merleen Johns

DETAILED SUMMARY PAGE

Name of Candidate or Committee <u>Peter Nielsen</u>	Report Covering the Period From <u>10 / 18 / 2004</u> to <u>11 / 12 / 2004</u>
--	---

UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>2</u>	Total Amount \$ <u>100.00</u>
UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>1</u>	Total Amount \$ <u>8.92</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 100.00
Itemized Contributions (total all Schedule A sheets)	\$ 1200.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 1300.00
<u>2</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 8.92
Itemized Expenditures (total all Schedule B sheets)	\$ 1416.35
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 1425.27
<u>0</u> Number of Schedule C-2B pages Attached	
Incurring Expenditures	
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)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$
<u>0</u> Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$

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

Name of Candidate or Committee
Peter Nielsen

		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
10/22/04 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	1. The Committee to Elect Mike Mozyle 1239 Maple St. Meridian, Id 83642	\$ 300. ⁰⁰	\$ _____	\$ _____
		\$ 300. ⁰⁰ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10/25/04 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2. The Id. Podiatric Med. Assn. POC 270 N 27th St. Suite B Boise, ID 83702	\$ 100. ⁰⁰	\$ _____	\$ _____
		\$ 100. ⁰⁰ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10/22/04 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	3. Avista Corp. P.O. Box 3727 Spokane, WA	\$ 250. ⁰⁰	\$ _____	\$ _____
		\$ 250. ⁰⁰ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10/21/04 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	4. Glaxo Smith Kline FPO 825 P.O. Box 13681 Philadelphia, PA 19101	\$ 250. ⁰⁰	\$ _____	\$ _____
		\$ 250. ⁰⁰ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11/1/04 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	5. IDALA (Assisted Living) 4708 Fairview, STE 100 Boise, ID 83706	\$ 100. ⁰⁰	\$ _____	\$ _____
		\$ 100. ⁰⁰ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11/1/04 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	6. Employers Resource 1301 S. Vista, Suite 200 Boise, ID 83705	\$ 200. ⁰⁰	\$ _____	\$ _____
		\$ 200. ⁰⁰ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	7.	\$ _____	\$ _____	\$ _____
		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	8.	\$ _____	\$ _____	\$ _____
		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	9.	\$ _____	\$ _____	\$ _____
		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	10.	\$ _____	\$ _____	\$ _____
		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ 1200. ⁰⁰	\$ _____	\$ _____

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

Page 112 of 112

Name of Candidate or Committee
Peter Nielsen

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A Cash or Check	Column B In-Kind (non-monetary)
<u>10/20/04</u>	¹ <u>Chevron Horseshoe Bend, ID</u>	<u>\$ 39.³⁷</u>	\$ _____
Purpose of Above Expenditure: <u>Gas for campaigning</u>			
<u>10/21/04</u>	² <u>A to Z Lumber 999 Airbase Rd Mtn. Home, ID 83647</u>	<u>\$ 109.⁵²</u>	\$ _____
Purpose of Above Expenditure: <u>Sign material</u>			
<u>10/21/04</u>	³ <u>Elmore Republican Central Committee Mountain Home, ID 83647</u>	<u>\$ 100.⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Help in advertising</u>			
<u>10/25/04</u>	⁴ <u>Mtn. Home News 195 So. 3rd East Mtn. Home ID 83647</u>	<u>\$ 528.²⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Ad</u>			
<u>10/25/04</u>	⁵ <u>Mtn. Home News 195 So. 3rd East Mtn. Home ID 83647</u>	<u>\$ 70.⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Ad</u>			
<u>10/27/04</u>	⁶ <u>Kelly Crogan 490 N 2 E Mtn Home, ID 83647</u>	<u>\$ 100.⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Making signs</u>			
<u>11/1/04</u>	⁷ <u>Mtn. Home News 195 So 3rd East Mtn. Home, ID 83647</u>	<u>\$ 185.⁵⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Ad</u>			
<u>11/1/04</u>	⁸ <u>El-wyhee Hi-lites 335 W Jackson Mtn. Home, ID 83647</u>	<u>\$ 104.⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>Ad</u>			
<u>11/2/04</u>	⁹ <u>Desert Wind Golf Range 3910 W 6 South Mtn. Home, ID 83647</u>	<u>\$ 75.⁰⁰</u>	\$ _____
Purpose of Above Expenditure: <u>After Election Party</u>			
Subtotals of Columns A & B		<u>\$ 1361.⁵⁹</u>	<u>\$ 0</u>

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

Name of Candidate or Committee
Peter Nielsen

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
11/8/04	1. A to Z Lumber 999 Airbase Rd Mtn. Home, ID 83647	\$ 54.76	\$ _____
Purpose of Above Expenditure: <u>sign material</u>			
____/____/____	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		\$ 54.76	\$ 0