C-2
Rev. 06/04

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

Section I

Name of Candidate or Political Committee and Chairperson			Office Sought (if candidate)	District (if any)
Bob Works			State Rep	22-A

Mailing Address ☐ Check if address change.	City and Zip	Home Phone	Work Phone
P.O. Box 964	Glenns Ferry 83623	208-366-2561	208-366-2329

Name of Political Treasurer
Retha Works

Mailing Address ☐ Check if address change.	City and Zip	Home Phone	Work Phone
P.O. Box 964		208-366-2561	208-366-2329

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 / 04__ through __11 / 12 / 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	$
Line 2: Enter Cash Balance at Close of Last Reporting Period**	$ 1609.50	$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	$ 0	$ 2500.00
Line 4: Subtotal (Add lines 1, 2 and 3)	$ 1609.50	$ 2500.00
Line 5: Total Expenditures (Enter amount from page 2)	$ 40.00	$ 930.50
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	$ 1569.50	$ 1569.50
Line 7: Outstanding Debt to Date	$	

*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 __Retha Works__ , 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.

Retha Works
Signature of Political Treasurer

Page 1

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

Page	of
1	1

Name of Candidate or Committee

Bob Works

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A Cash or Check	Column B In-Kind (non-monetary)
10/12/04	1. *Elmore County Democratic Dinner* *Mountain Home Middle School*	$ 40.00	$
Purpose of Above Expenditure: *Fundraiser Dinner*			
__/__/__	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	$	$
	Total This Page (add columns A & B)		$ 40.00