

C-2 Rev. 06/04



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

Section I

Form with fields for Name of Candidate (WILLIAM K. CHISHOLM), Office Sought (SENATE), District (23), Mailing Address (19073 E. HWY 30), City and Zip (BOULDER, ID 83316), Home Phone (543-4418), Work Phone (543-4418), Name of Political Treasurer (RICHARD CARLSON), Mailing Address (P.O. BOX 21), City and Zip (FILER, ID 83328), Home Phone (326-3680), Work Phone (326-3680)

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.

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: Line, COLUMN I This Period, 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 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.

Return This Report To: Ben Ysursa, Secretary of State, PO Box 83720, Boise ID 83720-0080, phone: (208) 334-2852, Fax: (208) 334-2282, DONE 11-29-04

Section V

CERTIFICATION

I RICHARD A. CARLSON, 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

DETAILED SUMMARY PAGE

Name of Candidate or Committee <i>WILLIAM K. CHISHOLM</i>	Report Covering the Period From <i>10/1/09</i> to <i>11/12/09</i>
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UNITEMIZED CONTRIBUTIONS
Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 2 Total Amount \$ 55.

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

Total Number 7 Total Amount \$ 126.00

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 55.
Itemized Contributions (total all Schedule A sheets)	\$ 1100.
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 1155.
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 126.
Itemized Expenditures (total all Schedule B sheets)	\$ 1475.74
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ -
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 1601.74
<u>0</u> Number of Schedule C-2B pages Attached	
Incurred 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
WILLIAM K. CHISHOLM

		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
10/20/04	1. PROFESSIONAL FIREFIGHTERS 10410 PAC BOX 3006 NAMPA, ID 83653-3006	\$ 250.	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 250. Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year To Date
10/18/04	2. KATY HAMILTON 1572 E 4196 N BOUL, ID 83310	\$ 500.	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 500. Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year To Date
10/28/04	3. RON WEINERT 1310 RIVERSIDE DR. BOUL, ID 83310	\$ 250.	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 500. Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year To Date
11/1/04	4. JIM/KOBY DE KLEINHANS 4894 N. 1000 E BOUL, ID 83310	\$ 100.	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 100. Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year To Date
____/____/____	5.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year To Date
____/____/____	6.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year To Date
____/____/____	7.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year To Date
____/____/____	8.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year To Date
____/____/____	9.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year To Date
____/____/____	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		\$ 1100.	\$	\$
Total This Page (add columns A, B & C)				\$ 1100.

**SCHEDULE B
ITEMIZED EXPENDITURES**

Page	of
i	1

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

Name of Candidate or Committee
WILLIAM K. CHISHOLM

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<i>10, 21, 04</i>	^{1.} <i>WILLIAM K. CHISHOLM 19073 E. HWY 30 Buhl, ID 83316</i>	\$ <i>119.88</i>	\$ _____
Purpose of Above Expenditure: <i>TRAVEL REIMBURSEMENT - Buhl - NAMPA/HOMEADLE - R. TRIP</i>			
<i>10, 22, 04</i>	^{2.} <i>SAME AS ABOVE</i>	\$ <i>109.08</i>	\$ _____
Purpose of Above Expenditure: <i>TRAVEL REIMBURSEMENT - Buhl - DUCK VALLEY - R. TRIP</i>			
<i>10, 23, 04</i>	^{3.} <i>SAME AS ABOVE</i>	\$ <i>125.28</i>	\$ _____
Purpose of Above Expenditure: <i>TRAVEL REIMBURSEMENT - Buhl - HOMEADLE - R. TRIP</i>			
<i>10, 18, 04</i>	^{4.} <i>BURL HEROLD P.O. BOX 312 Buhl, ID 83316</i>	\$ <i>270.</i>	\$ _____
Purpose of Above Expenditure: <i>ADVERTISING</i>			
<i>10, 25, 04</i>	^{5.} <i>SAME AS ABOVE</i>	\$ <i>135.</i>	\$ _____
Purpose of Above Expenditure: <i>ADVERTISING</i>			
<i>10, 21, 04</i>	^{6.} <i>OWYHEE ADVERTISER BOX 217 HOMEADLE, ID</i>	\$ <i>148.150</i>	\$ _____
Purpose of Above Expenditure: <i>ADVERTISING</i>			
<i>10, 21, 04</i>	^{7.} <i>IDaho PRESS TRIBUNE P.O. BOX 9399 NAMPA, ID 83652</i>	\$ <i>532.</i>	\$ _____
Purpose of Above Expenditure: <i>ADVERTISING</i>			
<i>10, 18, 04</i>	^{8.} <i>WEST END NEWS 119 BROADWAY SOUTH Buhl, ID 83316</i>	\$ <i>36.</i>	\$ _____
Purpose of Above Expenditure:			
<i>/ /</i>	^{9.}	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ <i>1475.74</i>	\$ _____
Total This Page (add columns A & B)			\$ _____