



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

2004 OCT 19 AM 8:55

**Section I**

Name of Candidate or Political Committee and Chairperson <b>Bolz for Idaho (Darrell Bolz)</b>		Office Sought (if candidate) <b>House of Rep.</b>	District (if any) <b>10-B</b>
Mailing Address <input type="checkbox"/> Check if address change. <b>3412 College Ave.</b>	City and Zip <b>Caldwell, ID 83605</b>	Home Phone <b>454-1334</b>	Work Phone <b>454-1334</b>
Name of Political Treasurer <b>Carol Bolz</b>			
Mailing Address <input type="checkbox"/> Check if address change. <b>3412 College Ave</b>	City and Zip <b>Caldwell, ID 83605</b>	Home Phone <b>454-1334</b>	Work Phone <b>454-1334</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 10 / 1 / 04 through 10 / 17 / 04

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report                       | <input type="checkbox"/> 30 Day Post-Primary Report | <input type="checkbox"/> October 10 Pre-General Report |
| <input checked="" type="checkbox"/> 7 Day Pre-General Report            | <input type="checkbox"/> 30 Day Post-General Report | <input type="checkbox"/> Annual Report                 |
| <input type="checkbox"/> 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).

	<b>COLUMN I This Period</b>	<b>COLUMN II Calendar Year to Date</b>
Line 1: Cash on Hand January 1, This Year*	\$ <u>XXXXXX</u>	\$ <u>2,159.84</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>2,480.45</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>1,200.00</u>	\$ <u>2,350.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>3,680.45</u>	\$ <u>4,509.84</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>430.63</u>	\$ <u>1,260.02</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>3,249.82</u>	\$ <u>3,249.82</u>
Line 7: Outstanding Debt to Date	\$ <u>0.00</u>	

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

*Carol Bolz*  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee  
**Bolz for Idaho (Darrell Bolz)**

Report Covering the Period  
 From 10 / 1 / 04 to 10 / 17 / 04

### UNITEMIZED CONTRIBUTIONS

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

Total Number 0                      Total Amount \$ 0.00

### UNITEMIZED EXPENDITURES

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

Total Number 2                      Total Amount \$ 30.63

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ 0.00
Itemized Contributions (total all Schedule A sheets)	\$ 1,200.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 1,200.00
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 30.63
Itemized Expenditures (total all Schedule B sheets)	\$ 400.00
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0.00
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 430.63
<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)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 0.00
<u>0</u> Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	
Amount Pledged this Period	\$ 0.00

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

Name of Candidate or Committee  
**Bolz for Idaho (Darrell Bolz)**

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
10 / 1 / 04	1. Canyon County Republicans c/o Mike Crow 504 16th St. South, Nampa, ID 83651	\$ _____	\$ 400.00	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ 400.00 Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 2 / 04	2. ID Assoc. of Chiropractic Physicians PAC P.O. Box 1863 Boise, ID 83701	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 100.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 5 / 04	3. Idaho Power Company P.O. Box 70 Boise, ID 83707	\$ 250.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 250.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 8 / 04	4. Wells Fargo Idaho PAC 119 N. 9th Street Boise, ID 83702	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 100.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 14 / 04	5. Corrections Corporation of America 10 Burton Hills Blvd. Nashville, TN 37215	\$ 350.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 350.00 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
Subtotals of Columns A, B & C		\$ 800.00	\$ 400.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 1,200.00

**SCHEDULE B  
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee  
Bolz for Idaho (Darrell Bolz)

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10 / 1 / 04	1. Canyon County Republicans c/o Mike Crow 504 16th St. South, Nampa, ID 83651	\$ _____	\$ 400.00
<b>Purpose of Above Expenditure:</b> Newspaper Advertising			
/ /	2.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	3.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	4.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	5.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	6.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
Subtotals of Columns A & B		\$ 0.00	\$ 400.00
Total This Page (add columns A & B)			\$ 400.00