

C-2
Rev. 11/03

CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE
(Please Print or Type)

Section I

| | | | |
|--|---|---|-----------------------------------|
| Name of Candidate or Political Committee and Chairperson Pete Welliver | | Office Sought (if candidate) House seat a | District (if any) 33 |
| Mailing Address 951 Limestone | <input type="checkbox"/> Check if address change. | City and Zip Idaho Falls 83404 | Home Phone 208-522-6683 |
| Name of Political Treasurer Lenorah Deanglis | | Home Phone 208-529-5851 | Work Phone 208-351-4386 |
| Mailing Address 2983 Chaparral | <input type="checkbox"/> Check if address change. | City and Zip Idaho Falls 83404 | Work Phone none |

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 01 / 01 / 04 through 05 / 09 / 04

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

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 | \$ 0.00 |
| Line 2: Enter Cash Balance at Close of Last Reporting Period** | \$ 0.00 | \$ XXXXXX |
| Line 3: Total Contributions (Enter amount from page 2) | \$ 2,320.00 | \$ 2,340.00 |
| Line 4: Subtotal (Add lines 1, 2 and 3) | \$ 2,320.00 | \$ 2,340.00 |
| Line 5: Total Expenditures (Enter amount from page 2) | \$ 150.77 | \$ 150.77 |
| Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** | \$ 2,169.23 | \$ 2,169.23 |

*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.

Section V

CONTRIBUTIONS PLEDGED-INCURRED EXPENDITURES

Contributions Pledged during this reporting period but not yet received: None \$ _____ (see attached Schedule C-2A)

Incurred Expenditures during this reporting period but not yet paid: None \$ _____ (see attached Schedule C-2B)

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

Section VI

CERTIFICATION

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

Lenorah deAnglis
Signature of Political Treasurer

DETAILED SUMMARY PAGE

| | |
|--|---|
| Name of Candidate or Committee Pete Welliver | Report Covering the Period From <u>01 / 01 / 04</u> to <u>05 / 09 / 04</u> |
|--|---|

| | |
|---|------------------------------|
| UNITEMIZED CONTRIBUTIONS Contributions of Fifty Dollars (\$50.00) or Less This Period | |
| Total Number <u>3</u> | Total Amount \$ <u>80.00</u> |
| UNITEMIZED EXPENDITURES Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period | |
| Total Number <u>1</u> | Total Amount \$ <u>10.77</u> |

| | Total This Period |
|---|--------------------|
| <u>1</u> Number of Schedule A pages Attached | |
| Contributions | |
| Unitemized Contributions (\$50 and less) from top of page | \$ 80.00 |
| Itemized Contributions (total all Schedule A sheets) | \$ 2,240.00 |
| Total Contributions (also enter this figure on page 1, Section IV, line 3) | \$ 2,320.00 |
| | |
| <u>1</u> Number of Schedule B pages Attached | |
| Expenditures | |
| Unitemized Expenditures (less than \$25) from top of page | \$ 10.77 |
| Itemized Expenditures (total all Schedule B sheets) | \$ 140.00 |
| Total Expenditures (also enter this figure on page 1, Section IV, line 5) | \$ 150.77 |

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

Name of Candidate or Committee
Pete Welliver

| | | 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 |
| 03 / 24 / 04 | 1. Pete Welliver 951 Limestone Idaho Falls, ID 83404 | \$ _____ | \$ 140.00 | \$ _____ |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | \$ _____ Calendar Year To Date | \$ 140.00 Calendar Year To Date | \$ _____ Calendar Year to Date |
| 03 / 31 / 04 | 2. Sue Welliver 951 Limestone Idaho Falls, ID 83404 | \$ 100.00 | \$ _____ | \$ _____ |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | \$ 100.00 Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| 05 / 08 / 04 | 3. IEA-Political Action Comm. for Education P.O. Box 2634 Boise, Idaho 8701-2630 | \$ 1,000.00 | \$ _____ | \$ _____ |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | \$ 1,000.00 Calendar Year To Date | \$ _____ Calendar Year To Date | \$ _____ Calendar Year to Date |
| 05 / 09 / 04 | 4. Frank Welliver 1365 Rimini Drive Helena, Mt. | \$ 1,000.00 | \$ _____ | \$ _____ |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | | \$ 1,000.00 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 |
| Subtotals of Columns A, B & C | | \$ 2,100.00 | \$ 140.00 | \$ 0.00 |
| Total This Page (add columns A, B & C) | | | | \$ 2,240.00 |

**SCHEDULE B
ITEMIZED EXPENDITURES**

| | |
|------|----|
| Page | of |
| 4 | 4 |

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

Name of Candidate or Committee
Pete Welliver

| Date | Full Name, Mailing Address and Zip Code of Recipient | Column A | Column B |
|---|--|---------------|------------------------|
| | | Cash or Check | In-Kind (non-monetary) |
| 03 / 24 / 04 | 1. Pete Welliver 951 Limestone Idah Falls, Idaho 83404 | \$ _____ | \$ 140.00 |
| Purpose of Above Expenditure: mailbox rental for campaign | | | |
| ____ / ____ / ____ | 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: | | | |
| Subtotals of Columns A & B | | \$ 0.00 | \$ 140.00 |
| Total This Page (add columns A & B) | | | \$ 140.00 |