FAX NO. : 2083231720

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10/7





CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

SUMMARY PAGE (Please Print or Type) POSTED

section I					
Name of Candidate or Political Cur	nmittee and Chrisperso			Office Sought (if candidate)	District (if any)
CECIL		SRAM		SENATE	16
Mailing Address	Charles a sailress of	Only min only		Home Phone	Work Phone
	ALLO DRI	VE BOISE	83704	208-375-887	N/A
Nume of Political Treasurer		·			
EDWARD V	V. CLEAK			TT Plant	1 77
	- Pina	hange. City and Zip	19-1	Home Phone	Work Phone
3110 CRESC	ENT NIT	UNO 15015E,	83706	208-429-1246	NA
Directions: To indicate the instructional manual for report	type of report being orting periods and its for the period	duc dates.			• •
7 Day Pre-Primary	Report	30 Day Post-Pri	mary Report	October 10	Pre-General Report
7 Day Pre-General	Report	30 Day Post-Ge	merai Report	Annual Rep	art
Semi-Annual Repo	rt (Statewide Cand	fidates Only)			
Is this Report as	amendment?	Yes X No	Is this a Terr	nination Report?	Yes 📑 No.
Section III	STATEMENT	OF NO CONTRIB	UTIONS OR E	EXPENDITURES	
		no contributions and / / / / 0.5 th			ANK ACCOUNT
Section IV		SUMM		•	ANLY
To reach your Calendar Yea figures to the Column II fig				OLUMN I his Period Cal	COLUMN II Condar Year to Date
Line 1: Cash on Hand Janua	ary 1. This Year*		s_2	CXXXXX s	56212
Line 2: Enter Cash Balance		eporting Period**	s	562.12 \$	XXXXXX
Line 3: Total Contributions			s	-o- s	40-
Line 4: Subtotal (Add lines		•	s:	562.12 \$	562712
Line 5: Total Expenditures (Enter amount from	i page 2)	s:	562.12 s	562012
Line 6: Cash Balance at Clo)** \$	-0- s	-03
Line 7: Outstanding Debt to) Date		\$	-0-	9 +
*This same figure should be **You must report the cash Note that the closing cash !	on hand at both the	e beginning of the rep	orting period an	d the close of the reporti	ing period. W
	Section V		CERTIFICA	VION	
Return This Report To:	/	V 1/1	America .		
Ben Ysursa	<i>y</i>	and hi	Duner	hereby certif	y that the information.
Secretary of State	in this	(name of Pullifor	i Trustoff	Campaign Financial Di	eclasure Dunce
PO Box 83720 Boise ID 83720-0080				7	scrusure report as
phone: (208) 334-2852	requir	red by law.	1 1/	∕	
fax: (208) 334-2282			ank.	F Sound	
ł	!	Si	gnature of Polit	ical Treasure	

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DETAILED SUMMARY PAGE

the state of the second		·
Name of Candidate or Committee		Report Covering the Period
. 19		
I FRUIT DITNER	AM FORSENATE	From 11/105 to 9/19/05
1001 01 47VO/	17/1 / JEVA JEVANI	() () () () () () () () () ()

	Total This Period
O Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ -0-
Itemized Contributions (total all Schedule A sheets)	\$ -0-
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ _0~
Number of Schedule B pages Attached	
Expenditures	
Unitermized Expenditures (less than \$25) from top of page	s -0-
Itemized Expenditures (total all Schedule B sheets)	\$ 562.12
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	5 0
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 562.12
Number of Schedule C-2B pages Attached	-0-
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	s -o-
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+\$ -0-
Subtotal	=5 -0 -
Payment this Period (Total all C-2Bs - Payment this Period)	-\$ -0-
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	=\$ -0-
Number of Schedule C-2A pages Attached	
Pledged Contributions	-6-
Amount Pledged this Period	\$ -05

. PROM : CECILINGRAM

Name of Candidate or Committee

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SCHEDULE B ITEMIZED EXPENDITURES

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

CEC	IL D. INGRAM FOR SENATE		
		Column A	Column B
Dute	Full Name, Mailing Address and Ztp Code of Recipient	Cash or Check	In-Kind (non-monetary)
919,05	CECIL D. INGRAH FORSTATE TO25 EL CABALLO DR. CONTROLLE BOISE, ID. 83704	s 562,12	\$
1	ove Expenditure: (HANGEO NAME ON BAI		
	2.		
		s	s
Purpose of Abo	ve Expenditure:		
	3.		
		s	s
Purpose of Abo	ove Expenditure:		1
	4.		
		\$	\$
Purpose of Abo	ove Expenditure:		
	5.		
		s	\$
Purpose of Abo	ove Expenditure:		
	6.		
		\$	s
Purpose of Abo	ove Expenditure:		<u> </u>
	7.		
		\$	S
Purpose of Abo	we Expenditure:		<u> </u>
		s	s
Purpose of Abo	ve Expenditure:		
	9.		
		S	s
Purpose of Abo	ove Expenditure:		
	Subtotals of Columns A & B	5 562.12	s s 562.12
	Total This Page (add columns A & B)		\$ 562.12