



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

ecnan	

mmittee and Chairperson		Office Sought (if candidate)		
		Legislature	24 B	
-		Home Phone	Work Phone	
3400 N.	Kimberly 8334	11 208-423-4783		
eynolds	,			
_	City and Zip	Hame Phone	Work Phone	
۲.	Twin Falls 833	01 208-734-1367		
porting periods and due dat	tes.			
Report 3	0 Day Post-Primary Rep	ort 🔲 October 10	Pre-General Report	
Report 3	30 Day Post-General Rep	ort 🔯 Annual Rej	port	
ort (Statewide Candidates	Only)			
n amendment?	⊠ No Is this	a Termination Report?	Yes 🗖 No	
STATEMENT OF N	O CONTRIBUTIONS	OR EXPENDITURES		
		COLUMN I	COLUMN II	
	ort (except on line 6).		lendar Year to Date	
ary 1, This Year*			207, 37	
at Close of Last Reporting	g Period**	\$ <u>207.37</u> \$	XXXXXX	
	2)	\$ \$		
		\$ 207.37 \$	207.37	
		\$ 55.64 \$	55.64	
ose of Period (Subtract line	e 5 from line 4)**	\$ <u>151.75</u> \$	151.73	
Date		\$		
on hand at both the begin	ning of the reporting peri	od and the close of the report		
Section V	CERT	IFICATION	77 %	
	11 1 1		70,00	
I_Judi	th A. Keynolds	hereby certi	fy that the information	
Secretary of State In this report is a true, complete and correct Campaign Financial Disclosure Report as				
Boiles ID 82720-0080				
required by I	- Vister	1 Hulada) '' · '	
) tyuth (- Jugnoros		
	Check if address change. 3 4 0 0 N. eynolds Check if address change. Check if address change	Check if address change. City and Zip	City and Zip	

Page 1

DETAILED SUMMARY PAGE

Name of Candidate or Committee	Report Covering the Period			
Maggi Fortner	Report Covering the Period From 01 01 2005 to 12 31 2005			
UNITEMIZED CONTRIBUT	IONS			
Contributions of Fifty Dollars (\$50.00) or Less This Period				
Total Total				
Number Amount \$	Ψ			
UNITEMIZED EXPENDITURES Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period				
Total Total Number Amount \$	ϕ			

	Total This Period
Number of Schedule A pages Attached	
Contributions	
Unitermized Contributions (\$50 and less) from top of page	s Ø
Itemized Contributions (total all Schedule A sheets)	\$ Ø
Total Contributions (also enter this figure on page 1, Section IV, line 3)	s Ø
Number of Schedule B pages Attached	
Expenditures	
Unitermized Expenditures (less than \$25) from top of page	s Ø
Itemized Expenditures (total all Schedule B sheets)	\$ 55.64
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ Ø
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 55,64
Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ Ø
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ Ø
Subtotal	= \$ Ø
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)	= \$ Ø
Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	s Ø

Name of Candidate or Committee

SCHEDULE B ITEMIZED EXPENDITURES

Page of 3

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

\lfloor m	aggi Fortner					
	9 \$	Column A	Column B			
Date	Full Name, Malling Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)			
04/30/05	Office Max 1519 Blue Lakes Blvd. N. Twin Falls, ID 83301	\$ 55.64	\$			
Purpose of Abo	ove Expenditure: Ink for Printer					
	2.					
		\$	\$			
Purpose of Above Expenditure:						
	3.					
//		\$	s			
Purpose of Abo	ove Expenditure:					
	4.					
		\$	\$			
Purpose of Abo	ove Expenditure:					
	5.					
		\$	\$			
Purpose of Abo	ove Expenditure:					
	6.					
//		\$	\$			
Purpose of Abo	ove Expenditure:					
	7.					
, ,		\$	s			
Durage of Abe	ove Expenditure:	<u> </u>				
T dt pose of Aoc	8.					
		\$	\$			
/	1	-	\$			
Purpose of Abo	ove Expenditure:					
	9.	\$	\$			
		3	J			
Purpose of Abo	ove Expenditure:	88 111				
	Subtotals of Columns A & B	<u>555.64</u>	5			
	Total This Page (add columns A & B)		s 55.64			