

C-2 Rev. 04/04



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

POSTED

07 APR - 4 PM 3: 00

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson, Office Sought, District, Mailing Address, City and Zip, Home Phone, Work Phone, Name of Political Treasurer, and their respective addresses and phone numbers.

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 11 / 18 / 06 through 12 / 31 / 06

- Checkboxes for 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, and Semi-Annual Report (Statewide Candidates Only).

Is this Report an amendment? [X] Yes [] No Is this a Termination Report? [] Yes [X] 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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand January 1, Total Cash Balance at Close of Last Reporting Period, 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.

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

[Signature] Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee Idaho AGC PAC	Report Covering the Period From 11 / 18 / 06 to 12 / 31 / 06
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>0</u>	Total Amount \$ <u>0.00</u>

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>0</u>	Total Amount \$ <u>0.00</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 0.00
Itemized Contributions (total all Schedule A sheets)	\$ 500.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 500.00
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 0.00
Itemized Expenditures (total all Schedule B sheets)	\$ -750.00
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)	\$ -750.00
<u>0</u> Number of Schedule C-2B pages Attached	
Incurring 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
Idaho AGC PAC

		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
12 / 27 / 06	1. Post Insurance Services PO Box 8447 Boise ID 83707	\$ 500.00	\$ _____	\$ _____
<input type="checkbox"/> Primary		\$ _____	\$ _____	\$ _____
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
/ /	2.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary		\$ _____	\$ _____	\$ _____
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
/ /	3.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary		\$ _____	\$ _____	\$ _____
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
/ /	4.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary		\$ _____	\$ _____	\$ _____
<input type="checkbox"/> General		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		\$ 500.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 500.00

**SCHEDULE B
ITEMIZED EXPENDITURES
of Twenty-Five Dollars (\$25.00) or more this period**

Name of Candidate or Committee
Idaho AGC PAC

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
08 / 17 / 06	1. Gerry Sweet 2567 NW 12th Street Meridian ID	\$ -250.00	\$
Purpose of Above Expenditure: Void check			
10 / 27 / 06	2. Gerry Sweet 2567 NW 12th Street Meridian ID	\$ -250.00	\$
Purpose of Above Expenditure: Void check			
08 / 17 / 06	3. Melvin Richardson 3725 Brookfield Lane Idaho Falls ID 83406	\$ -250.00	\$
Purpose of Above Expenditure: Void check			
/ /	4.	\$	\$
Purpose of Above Expenditure:			
/ /	5.	\$	\$
Purpose of Above Expenditure:			
/ /	6.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ -750.00	\$ 0.00
Total This Page (add columns A & B)			\$ -750.00