



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

POSTED

Section I

Name of Candidate or Political Committee and Chairperson CITIZENS FOR FIELD		Office Sought (if candidate) REP.	District (if any) 07 APR 81 PU 1:18
Mailing Address 3236 Chickovay Way	<input type="checkbox"/> Check if address change. City and Zip BOISE 83706	Home Phone 386-8566	Work Phone 424-8483
Name of Political Treasurer FREDA CENARRUSA			
Mailing Address 2400 Cherry Ln.	<input type="checkbox"/> Check if address change. City and Zip BOISE 83705	Home Phone 344-2443	Work Phone

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 / 23 / 06 through 11 / 17 / 06

- | | | |
|-------------------------------------------------------------------------|----------------------------------------------------------------|--------------------------------------------------------|
| <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 type="checkbox"/> 7 Day Pre-General Report | <input checked="" 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).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ XXXXXX	\$ 1829.01
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 9677.01	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 1600.00	\$ 16000.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 10237.01	\$ 17829.01
Line 5: Total Expenditures (Enter amount from page 2)	\$ 6254.45	\$ 13846.45
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 3982.56	\$ 3982.56
Line 7: Outstanding Debt to Date	\$ 0	

*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

CERTIFICATION

Return This Report To:
Ben Ysursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
phone: (208) 334-2852
fax: (208) 334-2282

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

Freda Cenarrusa
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee CITIZENS for Field	Report Covering the Period From <u>10/23/06</u> to <u>11/17/06</u>
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UNITEMIZED CONTRIBUTIONS

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

Total Number 0 Total Amount \$ 0

UNITEMIZED EXPENDITURES

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

Total Number 0 Total Amount \$ 0

	Total This Period
____ Number of Schedule A pages Attached	1
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 0
Itemized Contributions (total all Schedule A sheets)	\$ 1600.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 1600.00
____ Number of Schedule B pages Attached	1
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 0
Itemized Expenditures (total all Schedule B sheets)	\$ 6254.45
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	6254.45
____ Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 0
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ 0
Subtotal	= \$ 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	
Amount Pledged this Period	\$ 0

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

Name of Candidate or Committee
CITIZENS for Field

		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
<u>10/23/06</u>	^{1.} The GEO Group, Inc, PAC one PARK Place, Ste 700 BOCA RATON, FL 33487	\$ <u>500.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>10/24/06</u>	^{2.} Raybould for State Rep - 124 E. MAIN ST. REXBURG, ID 83440	\$ <u>500.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>10/24/06</u>	^{3.} CARI M. Coleman 3310 E. Rivercrest Ln. BOISE, ID 83706	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>11/5/06</u>	^{4.} IDAHO Retail Action Council 1109 MAIN ST. Ste. 331 BOISE 83702	\$ <u>200.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>11/5/06</u>	^{5.} Johnson & Johnson 6929 N. Camden Rd. Scottsdale, AZ 85250	\$ <u>200.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>11/5/06</u>	^{6.} Idaho Health Care Assoc. 1108 Main St., Meridian B Boise 83702	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> </u>	^{7.}	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> </u>	^{8.}	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> </u>	^{9.}	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> </u>	^{10.}	\$ _____	\$ _____	\$ _____
<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		\$ <u>1600.00</u>	\$ <u> </u>	\$ <u> </u>
Total This Page (add columns A, B & C)				\$ <u>1600.00</u>

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
CITIZENS FOR FIELD

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
<u>10/23/06</u>	¹ CORNERSTONE INSTITUTE BOX 191023, BOISE, ID 83709	\$ <u>500.00</u>	\$ _____
Purpose of Above Expenditure: <u>MAILING CONTRIBUTION</u>			
<u>10/26/06</u>	² OFFICE MAX 2509 BROADWAY AVE, BOISE 83706	\$ <u>448.15</u>	\$ _____
Purpose of Above Expenditure: <u>PRINTING</u>			
<u>11/2/06</u>	³ U.S.P.S. 844 E BANNOCK, BOISE 83702	\$ <u>156.00</u>	\$ _____
Purpose of Above Expenditure: <u>POSTAGE</u>			
<u>11/2/06</u>	⁴ TRACY COMMUNICATIONS BOX 1219, BOISE 83702	\$ <u>4265.50</u>	\$ _____
Purpose of Above Expenditure: <u>PRINTING & MAILING</u>			
<u>11/5/06</u>	⁵ OFFICE MAX 2509 BROADWAY AVE, BOISE 83706	\$ <u>534.80</u>	\$ _____
Purpose of Above Expenditure: <u>OFFICE SUPPLIES</u>			
<u>11/5/06</u>	⁶ LUNA FOR IDAHO BOX 1219, BOISE 83702	\$ <u>250.00</u>	\$ _____
Purpose of Above Expenditure: <u>Cont.</u>			
<u>11/5/06</u>	⁷ Donna Jones for Controller 912 W Jefferson, Boise, 83702	\$ <u>100.00</u>	\$ _____
Purpose of Above Expenditure: <u>Cont.</u>			
	⁸ _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
	⁹ _____	\$ _____	\$ _____
Purpose of Above Expenditure: _____			
Subtotals of Columns A & B		\$ <u>6254.45</u>	\$ <u>0</u>
Total This Page (add columns A & B)			\$ <u>6254.45</u>