



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

Section I

Name of Candidate or Political Committee and Chairperson UNITED FAMILIES (BAND RETURN) FUND		Office Sought (if candidate) DEAD	District (if any) 06 DEC - 7
Mailing Address 180 S. 800 W.	<input type="checkbox"/> Check if address change.	City and Zip BLAKEFOOT 83221	Home Phone 524-9900
Name of Political Treasurer MICHAEL DUFF		STATE OF IDAHO	
Mailing Address 180 S. 800 W.	<input type="checkbox"/> Check if address change.	City and Zip 83221	Home Phone 684-9246
		Work Phone 684-9243	

PM 5:01
OF STATE
IDAHO

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 10/23/04 through 11/19/04

- 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
 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*	\$ <u>XXXXXX</u>	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>421.32</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>4,700.00</u>	\$ <u>14,469.20</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>5,121.32</u>	\$ <u>14,469.20</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>4,019.97</u>	\$ <u>1,336.85</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>1,101.35</u>	\$ <u>1,101.35</u>
Line 7: 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 MICHAEL DUFF hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee UNITED FAMILIES DEMO ACTION FUND	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 <u>0</u>	Total Amount \$ <u>0</u>

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>1</u>	Total Amount \$ <u>19.97</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>0</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>4,200.00</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>4,200.00</u>
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>19.97</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>4,000.00</u>
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>4,019.97</u>
<u> </u> Number of Schedule C-2B pages Attached	
Incurred 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> </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
LIMITED FAMILIES IDAHO ACTION FUND

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
10/23/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	1. EVADA BUTER 1842 E. 1500 N. TERRETON, ID 83450	\$ 100.00	\$ _____	\$ _____
		\$ 100.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10/26/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2. COLLEEN PETERSON 5503 W. AUKORA DR. IDAHO FALLS, ID 83402	\$ 100.00	\$ _____	\$ _____
		\$ 100.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/01/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	3. BART M. DAVIS FOR IDAHO SENATE P.O. BOX 1845 IDAHO FALLS, ID 83403-1845	\$ 500.00	\$ _____	\$ _____
		\$ 500.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/03/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	4. FRANK AND BELINDA VANDERSLUGT P.O. BOX 50305 IDAHO FALLS, ID 83405	\$ 2,000.00	\$ _____	\$ _____
		\$ 2,000.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
11/07/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	5. MEL LEUCK INC 3910 S. YELLOWSTONE HWY. IDAHO FALLS, ID 83402 - 6003	\$ 2,000.00	\$ _____	\$ _____
		\$ 2,000.00 Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	6.	\$ _____	\$ _____	\$ _____
		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	7.	\$ _____	\$ _____	\$ _____
		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	8.	\$ _____	\$ _____	\$ _____
		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	9.	\$ _____	\$ _____	\$ _____
		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
____/____/____ <input type="checkbox"/> Primary <input type="checkbox"/> General	10.	\$ _____	\$ _____	\$ _____
		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ 4,700.00	\$ _____	\$ _____
Total This Page (add columns A, B & C)		\$ 4,700.00	\$ _____	\$ 4,700.00

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
UNITED FAMILIES IDAHO ACTION FUND

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
11/03/06	1. RIVERBEND COMMUNICATIONS 1540 LINCOLN ROAD IDAHO FALLS, ID 83401	\$ 2,000.00	\$
Purpose of Above Expenditure: RADIO ADS			
11/06/06	2. CITADEL BROADCASTING CO. P.O. BOX 1120 BOISE, ID. 83701	\$ 2,000.00	\$
Purpose of Above Expenditure: RADIO ADS			
1/1/	3.	\$	\$
Purpose of Above Expenditure:			
1/1/	4.	\$	\$
Purpose of Above Expenditure:			
1/1/	5.	\$	\$
Purpose of Above Expenditure:			
1/1/	6.	\$	\$
Purpose of Above Expenditure:			
1/1/	7.	\$	\$
Purpose of Above Expenditure:			
1/1/	8.	\$	\$
Purpose of Above Expenditure:			
1/1/	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 4,000.00	\$
Total This Page (add columns A & B)		\$ 4,000.00	\$