



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

Section I

Name of Candidate or Political Committee and Chairperson Lenore Hardy Barrett		Office Sought (if candidate) Rep	District (if any) 35
Mailing Address PO Box 347	<input type="checkbox"/> Check if address change.	City and Zip Challis 83226	Home Phone 208 879 2797
Name of Political Treasurer Lenore Hardy Barrett		Work Phone STATE OF IDAHO same	
Mailing Address Same as above	<input type="checkbox"/> Check if address change.	City and Zip	Home Phone
		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 / 01 / 06 through 10 / 22 / 06

- 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>5,725.61</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>750.00</u>	\$ _____
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>6,475.61</u>	\$ _____
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>342.02</u>	\$ _____
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>6,133.59</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

Lenore Hardy Barrett
(name of Political Treasurer)
I, _____, 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 Lenore Hardy Barrett	Report Covering the Period From <u>10 / 01 / 06</u> to <u>10 22 / 06</u>
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UNITEMIZED CONTRIBUTIONS
Contributions of Fifty Dollars (\$50.00) or Less This Period

Total 0 Total 0
Number _____ Amount \$ _____

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

Total _____ Total
Number 5 Amount \$ 91.55

	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)	\$ 750.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 750.00
____ Number of Schedule B pages Attached	1
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 91.55
Itemized Expenditures (total all Schedule B sheets)	\$ 250.47
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)	\$ 352.02
____ Number of Schedule C-2B pages Attached	0
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)	= \$
____ Number of Schedule C-2A pages Attached	
Pledged Contributions	0
Amount Pledged this Period	\$

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

Name of Candidate or Committee
Lenore Hardy Barrett

		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
10/13/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	1. Calvin J or Carol L Whittaker P.O. Box 10 Leadore, ID 83454	\$ 50.00 _____ Calendar Year To Date	\$ _____ _____ Calendar Year To Date	\$ _____ _____ Calendar Year To Date
10/10/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2. Idaho Milk P.A.C. P.O. Box 2751 Boise, ID 83701	\$ 200.00 _____ Calendar Year To Date	\$ _____ _____ Calendar Year To Date	\$ _____ _____ Calendar Year To Date
09/27/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	3. K12 South Point II 2300 Corporate Park Dr. Herndon, VA 20171	\$ 250.00 _____ Calendar Year To Date	\$ _____ _____ Calendar Year To Date	\$ _____ _____ Calendar Year To Date
09/29/06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	4. Avista Corp. P.O. Box 3727 Spokane, WA 99220-3727	\$ 250.00 _____ Calendar Year To Date	\$ _____ _____ Calendar Year To Date	\$ _____ _____ Calendar Year To Date
_____ <input type="checkbox"/> Primary <input type="checkbox"/> General	5.	\$ _____ _____ 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		\$ 750.00	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ 750.00

SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee
Lenore Hardy Barrett

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10/10/06	1. Postmaster 601 N Main Challis, ID 83226	\$ 39.00	\$
Purpose of Above Expenditure: stamps			
10/12/06	2. Stage Coach Inn 201 HWY 93 N Salmon, ID 83467	\$ 49.68	\$
Purpose of Above Expenditure: Candidate forum/Salmon			
10/12/06	3. Lenore Barrett P.O. Box 347 Challis, ID 83226	\$ 47.79	\$
Purpose of Above Expenditure: Candidate forum/Salmon 118 mi @ 40.59c/mi			
10/13/06	4. KMC Enhance Tech 1603 Main St. Salmon, ID 83467	\$ 66.21	\$
Purpose of Above Expenditure: Office			
10/02/06	5. Lenore Barrett P.O. Box 347 Challis, ID 83226	\$ 47.79	\$
Purpose of Above Expenditure: Senior Citizens luncheon 118 mi @ 40.59c/mi			
____/____/____	6.	\$	\$
Purpose of Above Expenditure:			
____/____/____	7.	\$	\$
Purpose of Above Expenditure:			
____/____/____	8.	\$	\$
Purpose of Above Expenditure:			
____/____/____	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 250.47	\$
Total This Page (add columns A & B)			\$ 250.47