



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

C-2
Rev. 10/07

Section I

Name of Candidate or Political Committee and Chairperson MIKE WARWICK		Office Sought (if candidate) STATE REP		District (if any) 10. A
Mailing Address 1424 DEARBORN	City and Zip CALDWELL 83605	Home Phone 454-8971	Work Phone 249-1849	
Name of Political Treasurer SHARON L. BROWN				
Mailing Address 1701 FILLMORE STREET	City and Zip CALDWELL 83605	Home Phone 459-8966	Work Phone N/A	

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment

This report is for the period from **11 / 15 / 08** through **12 / 31 / 08**

- | | | |
|---|---|--|
| <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 type="checkbox"/> 30 Day Post-General Report | <input checked="" type="checkbox"/> Annual Report |
| <input type="checkbox"/> Semi-Annual Report (Statewide Candidates Only) | | |

Is this a Termination Report: Yes No

2009 JAN -9 AM 8:45
SECRETARY OF STATE
STATE OF IDAHO

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 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.

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 Calendar Year*	\$ <u>XXXXXX</u>	\$ <u>0</u>
Line 2: Enter Beginning Cash Balance**	\$ _____	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ _____	\$ _____
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ _____	\$ _____
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ <u>0</u>	\$ <u>0</u>
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ <u>0</u>	\$ <u>0</u>
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ <u>0</u>	\$ _____

*This same figure should be entered on line 1 of all reports filed this calendar year.

**This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.

Note: The closing cash balance for the current reporting period appears on the next report as the beginning cash on hand.

Section V

Return This Report To:
Ben Yursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
Phone: (208) 334-2852
Fax: (208) 334-2282

I, SHARON L. BROWN, hereby certify that the information in this
Name of Political Treasurer

report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Sharon L. Brown
Signature of Political Treasurer