



CAMPAIGN FINANCIAL DISCLOSURE REPORT

10 MAY 17 AM 9:07

C-2  
Rev. 2/10

SUMMARY PAGE  
(Please Print or Type)

SECRETARY OF STATE  
STATE OF IDAHO

Section I

|  |   |   |                                   |                   |
|--|---|---|-----------------------------------|-------------------|
| Name of Candidate or Political Committee and Chairperson<br><b>AMAKA WELLS</b> |   | Office Sought (if candidate)<br><b>GOVERNOR</b> |                                   | District (if any) |
| Mailing Address<br><b>7759 N. Huetter Rd</b>                                   | City and Zip<br><b>POST FALLS 83854</b> | Home Phone<br><b>208 667-5823</b>               | Work Phone<br><b>208 762-2679</b> |                   |
| Name of Political Treasurer<br><b>LAMARA WELLS</b>                             |   |   |                                   |                   |
| Mailing Address<br><b>7759 N. Huetter Rd</b>                                   | City and Zip<br><b>POST FALLS 83854</b> | Home Phone<br><b>208 667-5823</b>               | Work Phone<br><b>208 762-2679</b> |                   |

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 \_\_\_/\_\_\_/\_\_\_ through \_\_\_/\_\_\_/\_\_\_.

- 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 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 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<br>This Period | COLUMN II<br>Calendar Year<br>to Date |
|--|-------------------------|---------------------------------------|
| Line 1: Cash on Hand January 1, This Calendar Year*                  | \$ XXXXXX               | \$ 0                                  |
| Line 2: Enter Beginning Cash Balance**                               | \$ 0                    | \$ XXXXXX                             |
| Line 3: Total Contributions (Enter amount from line 5, page 2)       | \$ _____                | \$ 2044.00                            |
| Line 4: Subtotal (Add lines 1, 2 and 3)                              | \$ _____                | \$ 2044.00                            |
| Line 5: Total Expenditures (Enter amount from line 11, page 2)       | \$ _____                | \$ 2044.00                            |
| Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)      | \$ _____                | \$ 0                                  |
| Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) | \$ _____                |                                       |

\*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, Lamara Wells, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Lamara Wells  
 Signature of Political Treasurer

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

Name of Candidate or Committee: \_\_\_\_\_

| Date Received   | Full Name, Mailing Address and Zip Code of Contributor  | Cash or Check   |
|---|---|---|
| <del>3/18/10</del><br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General | 1. <del>EDDIE SUTHERLAND OF STATE</del> NONE<br><del>2084 83720</del><br><del>Belle, IN 46720</del> | <del>\$ 301.00</del><br>\$ _____<br>Calendar Year-To-Date |
| <del>3/32/10</del><br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General | 2. <del>ADVANTAGE Northwest</del> WML<br><del>3024</del>  | \$ _____<br>\$ _____<br>Calendar Year-To-Date             |
| <del>1/1/10</del><br><input checked="" type="checkbox"/> Primary<br><input type="checkbox"/> General  | 3. TAMARA WELLS<br>7759 N. HARTMAN Rd<br>WEST FALLS, IN. 46784                                      | \$ 2044.00<br>\$ _____<br>Calendar Year-To-Date           |
| / /<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General                           | 4.  | \$ _____<br>\$ _____<br>Calendar Year-To-Date             |
| / /<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General                           | 5.  | \$ _____<br>\$ _____<br>Calendar Year-To-Date             |
| / /<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General                           | 6.  | \$ _____<br>\$ _____<br>Calendar Year-To-Date             |
| / /<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General                           | 7.  | \$ _____<br>\$ _____<br>Calendar Year-To-Date             |
| / /<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General                           | 8.  | \$ _____<br>\$ _____<br>Calendar Year-To-Date             |
| / /<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General                           | 9.  | \$ _____<br>\$ _____<br>Calendar Year-To-Date             |
| / /<br><input type="checkbox"/> Primary<br><input type="checkbox"/> General                           | 10.   | \$ _____<br>\$ _____<br>Calendar Year-To-Date             |
| Total This Page:  |   | \$ _____  |

## SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee: TAMARA WELLS.

**Purpose Codes**

- |   |  |
|---|--|
| <p><b>A</b> All Travel Expenses (Airfare, Fuel, Lodging &amp; Mileage)</p> <p><b>B</b> Broadcast Advertising (Radio, TV &amp; Internet)</p> <p><b>C</b> Contributions to Candidates &amp; PAC's</p> <p><b>D</b> Donations &amp; Gifts</p> <p><b>E</b> Event Expenses</p> <p><b>F</b> Food &amp; Refreshments</p> <p><b>G</b> General Operational Expenses</p> <p><b>L</b> Literature, Brochures, Printing</p> <p><b>M</b> Management Services</p> | <p><b>N</b> Newspaper &amp; Other Periodical Advertising</p> <p><b>O</b> Other Advertising (Yard Signs, Buttons, etc.)</p> <p><b>P</b> Postage</p> <p><b>S</b> Surveys &amp; Polls</p> <p><b>T</b> Tickets (Events)</p> <p><b>U</b> Utilities</p> <p><b>W</b> Wages, Salaries, Benefits &amp; Bonuses</p> <p><b>Y</b> Petition Circulators</p> <p><b>Z</b> Preparation &amp; Production of Advertising</p> |
|---|--|

| Date Spent       | Full Name, Mailing Address and Zip Code of Recipient                        | Purpose Code | Cash or Check          |
|------------------|---|--------------|------------------------|
| 3/18/10          | 1. STATE OF IDAHO<br>SECRETARY OF STATE<br>PO Box 83720<br>Boise, ID, 83720 | G            | \$ 301. <sup>00</sup>  |
| 3/22/10          | 2. ADVANTAGE Northwest<br>3024 N. Government Way<br>COEUR D'ALENE 83814     | B.           | \$ 700.00              |
| 3/30/10          | 3. OFFICE MAY<br>201 WEST CANFIELD AVE.<br>COEUR D'ALENE, ID. 83815         | L            | \$ 152.03              |
| 3/30/10          | 4. OFFICE MAY<br>201 WEST CANFIELD AVE<br>COEUR D'ALENE, ID 83815           | L            | \$ 137.45              |
| 4/15/10          | 5. 50 PERCENT CARD SHOP<br>2150 APPLEWAY ST<br>COEUR D'ALENE, ID 83814      | E            | \$ 109.74              |
| 4/16/10          | 6. 50 PERCENT CARD SHOP<br>2150 APPLEWAY ST<br>COEUR D'ALENE, ID 83814      | E            | \$ 38.38               |
| 5/1/10           | 7. UPS STORE<br>1869 E SELTICE WAY<br>POST FALLS ID. 83854                  | L            | \$ 209.40              |
| 5/4/10           | 8. CARUBO'S Deli<br>113 W FRANKIE<br>MAYDEN, ID 83835                       | E, F         | \$ 396.00              |
| _/_/_            | 9.  |              | \$ _____               |
| _/_/_            | 10.   |              | \$ _____               |
| Total This Page: |   |              | \$ 2044. <sup>00</sup> |

## DETAILED SUMMARY

Name of Candidate or Committee: Tamara Wells

|                      |  | Total This Period   |
|----------------------|--|---------------------|
| <b>Contributions</b> |  |                     |
| ①                    | Unitemized Contributions (\$50 and less) # of Contributors _____                 | + \$                |
| ②                    | Itemized Contributions (Total of all Schedule A sheets)                          | + \$ <u>2044.00</u> |
| ③                    | In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets) | + \$                |
| ④                    | Loans (Total of all New Loan amounts from Schedule D sheets)                     | + \$                |
| ⑤                    | Total Contributions (Transfer this figure to page 1, Section IV, Line 3)         | = \$ <u>2044.00</u> |

|                     |   |                     |
|---------------------|---|---------------------|
| <b>Expenditures</b> |   |                     |
| ⑥                   | Unitemized Expenditures (\$25 and less) # of Expenditures _____                         | + \$                |
| ⑦                   | Itemized Expenditures (Total of all Schedule B sheets)                                  | + \$ <u>2044.00</u> |
| ⑧                   | In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)          | + \$                |
| ⑨                   | Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)            | + \$                |
| ⑩                   | Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets) | + \$                |
| ⑪                   | Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)                 | = \$ <u>2044.00</u> |

|                                     |   |                 |
|-------------------------------------|---|-----------------|
| <b>Loans, Credit Cards and Debt</b> |   |                 |
| ⑫                                   | Outstanding Balance from previous reporting period  | + \$ <u>N/A</u> |
| ⑬                                   | New Loans received during this reporting period<br>(Total of all New Loan amounts plus Accrued Interest from Schedule D sheets) | + \$            |
| ⑭                                   | New Credit Card and Debt incurred this reporting period<br>(Total of all New Incurred Debt amounts from Schedule E sheets)      | + \$            |
| ⑮                                   | Subtotal  | = \$            |
| ⑯                                   | Repayments of Loans made during this reporting period<br>(Total of all Loan Repayment amounts from Schedule D sheets)           | - \$            |
| ⑰                                   | Repayments of Credit Card and Debt this reporting period<br>(Total of all Debt Repayment amounts from Schedule E sheets)        | - \$            |
| ⑱                                   | Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)                          | = \$ <u>N/A</u> |

|                              |   |                 |
|------------------------------|---|-----------------|
| <b>Pledged Contributions</b> |   |                 |
| ⑲                            | Unitemized Pledged Contributions (\$50 and less) # of Pledges _____         | + \$ <u>N/A</u> |
| ⑳                            | Itemized Pledged Contributions this Period (Total of all Schedule F sheets) | + \$            |
| ㉑                            | Total Pledged Contributions this period                                     | = \$            |