CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE 17 JAN 31 PM 03:21

C-2 Rev. 5/11

SUMMARY PAGE (Please Print or Type)

SECRETARY OF STATE! PM 3: 33

| Section I | | | STATE OF I | DAHO | ,, | | |
|--|---|-----------------------------|-----------------------------|----------------------------|---------|--|--|
| Name of Candidate or Political Committee and Chair | person | | Office Sought (if candidate | District (itany) | TE | | |
| Kate McAlister | City and Zi | | St Rep, Pos A | STATE UP IDAHO | | | |
| Mailing Address PO Box 292 | pint 83864 | Home Phone | Work Phone 2082632161 | | | | |
| Name of Political Treasurer | Sanupo | JIII 03004 | | 2002032101 | | | |
| Karl J Dye | | | | | | | |
| Mailing Address | City and Zi | | Home Phone | Work Phone | | | |
| 1714 Larch St | | oint 83864 | 2082906713 | 2082906713 | | | |
| Change of address for: Candidate or | Political Committee | Political Treasurer | | | | | |
| Section II This filing is an: | Amendment | OF REPORT | | | | | |
| This report is for the period from11/_ | 19 / 2016 through <u>12</u> | <u> </u> | | | | | |
| 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 R | eport | | | |
| Semi-Annual Report (Statewide (| Candidates Only) No | | | | | | |
| Section III | STATEMENT OF NO CONT | TRIBUTIONS OR EXPE | NDITURES | | | | |
| Directions: If you had no contributions or | | | | | port. | | |
| Be sure to carry | forward the appropriate "Ca | lendar Year to Date" fig | ures in Column II, Sec | tion IV. | | | |
| I hereby certify that I hav | e received no contributions | and have made no expe | enditures during this re | eporting period. | | | |
| Section IV | S | UMMARY | | | | | |
| To reach your Calendar Year to Date figure | | | COLUMN I | COLUMN II | | | |
| figures to the Column II figures of your previous report (except on line 6). | | | his Period | Calendar Year | | | |
| | | | | to Date | | | |
| Line 1: Cash on Hand January 1, This Cale | endar Year* | \$> | (XXXXX | \$ 0.00 | | | |
| Line 2: Enter Beginning Cash Balance** | | <u>\$ 76</u> | 5.84 | \$ XXXXXX | | | |
| Line 3: Total Contributions (Enter amount fi | rom line 5, page 2) | \$~ 0.(| 10 40236 | \$ <u>39,614.68</u> 40 | 1017.04 | | |
| Line 4: Subtotal (Add lines 1, 2 and 3) | | \$_ 76 | 5.84 1168 20 | \$ 39,614.68 40 | 3017.04 | | |
| Line 5: Total Expenditures (Enter amount fr | rom line 11, page 2) | \$ -0. 0 | 10 40 236 | \$ 38,848.84 3° | 7251.20 | | |
| Line 6: Enter Ending Cash Balance (Subtra | act line 5 from line 4) | <u>\$ 76</u> | 5.84 | \$ <u>765.84</u> | | | |
| Line 7: Outstanding Debt to Date (Enter an | Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) \$_0.00 | | | | | | |
| *This same figure should be entered on line **This is the figure on line 6 of the last Cam Note: The closing cash balance for the curr | paign Financial Disclosure I | Report filed. If this is yo | | | | | |
| Section V | | | | | | | |
| Return This Report To: | | | | | | | |
| Lawerence Denney | , Karl J Dye | | hereby certify that | the information in this | | | |
| Secretary of State PO I, Karl J Dye Name of Political Treasurer Name of Political Treasurer | | | | | | | |
| | Boise ID 83720-0080 report is a true, complete and correct Campaign Financial Disclosure Report as required by law. | | | | | | |
| Fax: (208) 334-2282 | | Digit | al Signature | | | | |
| | | | re of Political Treasure | er | • | | |

DETAILED SUMMARY

Name of Candidate or Committee: Kate McAlister

| | | Total This Period |
|-----|---|----------------------------|
| | Contributions | |
| 1 | Unitemized Contributions (\$50 and less) # of Contributors O | + \$0.00 |
| 2 | Itemized Contributions (Total of all Schedule A sheets) | + \$0.00 |
| 3 | In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets | + \$0.00 -40236 |
| 4 | Loans (Total of all New Loan amounts from Schedule D sheets) | + \$0.00 |
| (5) | Total Contributions (Transfer this figure to page 1, Section IV, Line 3) | = \$0.00 40 2 34 |

| | Expenditures | | | |
|-----|---|---|-------------------|-------|
| 6 | Unitemized Expenditures (Less than \$25) # of Expenditures 0 | + | \$0.00 | |
| 7 | Itemized Expenditures (Total of all Schedule B sheets) | + | \$0.00 | |
| 8 | In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets) | + | \$0.00 | 40234 |
| 9 | Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets) | + | \$0.00 | |
| 10 | Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets) | + | \$0.00 | |
| 11) | Total Expenditures (Transfer this figure to page 1, Section IV, Line 5) | = | \$0.00 | 4023 |

| | Loans, Credit Cards and Debt | | |
|------|--|---|--------|
| 12 | Outstanding Balance from previous reporting period | + | \$0.00 |
| 13) | New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets) | + | \$0.00 |
| 14) | New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets) | + | \$0.00 |
| 15) | Subtotal | = | \$0.00 |
| 16) | Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets) | - | \$0.00 |
| 17) | Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets) | - | \$0.00 |
| (18) | Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7) | = | \$0.00 |

| | Pledged Contributions | | |
|----------|---|---|--------|
| 19 | Unitemized Pledged Contributions (\$50 and less) # of Pledges O | + | \$0.00 |
| 20 21 | Itemized Pledged Contributions this Period (Total of all Schedule F sheets) | + | \$0.00 |
| | Total Pledged Contributions this period | = | \$0.00 |

SCHEDULE C IN-KIND CONTRIBUTIONS and EXPENDITURES

Name of Candidate or Committee:

| Page | of |
|------|----|
| 1 | 1 |

| Pu | rpos | e Codes (Enter i | up to 3 purpose codes per Expenditure.) | | | | |
|--|---|----------------------------------|--|-------------------------------|----------------------------------|------------------------|---------------------------------------|
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) | | N | Newspaper & Other Periodica | | | | |
| | B Broadcast Advertising (Radio, TV, Internet & Telephone) | | 0 | Other Advertising (Yard Signs | s, Buttons, etc.) | | |
| | C Contributions to Candidates & PAC's | | Р | Postage | | | |
| | D | Donations & Gi | | S | Surveys & Polls | | |
| | E Event Expenses | | T | Tickets (Events) | | | |
| | F | Food & Refresh | | U | Utilities | _ | |
| | G | • | tional Expenses | W | Wages, Salaries, Benefits & I | Bonuses | |
| | Н | Independent Ex | | Y 7 | Petition Circulators | duatiana | |
| | L M | Literature, Broo Management S | , , | Z | Preparation & Production of A | Advertising | |
| | 141 | | | | | | |
| 1. | 8 | .19 .16 | Contributor Name, Mailing Address and Idaho State Democratic Party | I Zip | Code | | 402.36 |
| | | | PO Box 445 | | | | a |
| | | □ Primary | Boise, ID 83701-0445 | | | | \$ |
| | | ☑ General | • | | | | Calendar Year-To-Date |
| | | | Expenditure Name, Mailing Address an | d Zir | Code | | Purpose Code(s) |
| | | | Control Point Group | | | | В |
| | | | 458 New Jersey Ave | | | 402.36 | В |
| | | | Washington, DC 20003 | | | \$ | |
| 2. | | | Contributor Name, Mailing Address and | Zip | Code | | |
| | | , , | | | | | \$ |
| | | | | | | | |
| | | ☐ Primary | | | | | \$ |
| | | ☐ General | Farmer Manager Andrews | 4 7: | - O- d- | | Calendar Year-To-Date |
| | | | Expenditure Name, Mailing Address an | a Zif | o Code | | Purpose Code(s) |
| | | | | | | | |
| | | | | | | \$ | |
| _ | | | | . . . | 0 1 | 3 | |
| 3. | | | Contributor Name, Mailing Address and | I ZIP | Code | | ¢ |
| | _ | | | | | | a |
| | | □ Primary | | | | | \$ |
| | | ☐ General | | | | | Calendar Year-To-Date |
| | | | Expenditure Name, Mailing Address an | d Zip | p Code | | Purpose Code(s) |
| | | | | | | | |
| | | | | | | | |
| | | | | | | \$ | |
| 4. | | | Contributor Name, Mailing Address and | l Zip | Code | | |
| | | 1 1 | | | | | \$ |
| | | ☐ Primary | | | | | |
| | | ☐ General | | | | | S |
| | | _ 55115141 | Expenditure Name, Mailing Address an | d 7ii | n Code | | Calendar Year-To-Date Purpose Code(s) |
| | | | Experience (4airle, Mailing Address ar | ·~ ~1 | y 3000 | | , u.p.556 00uc(6) |
| | | | | | | | |
| | | | | | | \$ | |
| | | | L | | Expenditure Total: | | 1 |
| | | | (Transfer the combined total of all E | xper | | \$402.36 | |
| | | | | | ailed Summary, page 2 line 8) | | |
| | | | | | , , , | Contributor Total: | \$400.00 |
| | | | (Transfer th | e coi | mbined total of all Contributors | | \$402.36 |
| L | | | | | to the Detailed Su | ımmary, page 2 line 3) | |