## CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE

18 OCT 18 PM 02:37

C-2 Rev. 5/11

(Please Print or Type)

## SECRETARY OF STATE STATE OF IDAHO

| Section I   |                                     |   | SIAIE                       | OF IDAHO                              |             |
|---|-------------------------------------|---|-----------------------------|---------------------------------------|-------------|
| Name of Candidate or Political Comm   |                                     | . 00  | Office Sought (if car       | ndidate) District                     | (if any)    |
| Tom Katsilometes fo   | r idano State Senate                | ≥ 29<br>  City and Zip                                | Home Phone                  | Work Phone                            |             |
| PO Box 11   |                                     | Pocatello 83204                                       | nome Filone                 | 2082331409                            | 9           |
| Name of Political Treasurer Tom Katsilometes  |                                     |   |                             | -                                     |             |
| Mailing Address   |                                     | City and Zip  | Home Phone                  | Work Phone                            |             |
| PO Box 11   |                                     | Pocatello 83204                                       |                             | 2082331409                            | )           |
| J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.   | Candidate or Political Committe     |   | Treasurer                   |                                       |             |
| Section II This filing is an:  C This report is for the period from                                   | Original Amendmer                   |   | 2018                        |                                       |             |
| 7 Day Pre-Primary R   |                                     | Day Post-Primary Repo                                 |                             | ober 10 Pre-General Repo              | rt          |
| 7 Day Pre-General R   |                                     | Day Post-General Rep                                  |                             | ual Report                            |             |
| Semi-Annual Report Is this a Termination Report:  | (Statewide Candidates Only)  Yes No |   |                             |                                       |             |
| Section III Directions: If you had no con Be s  |                                     |   | check the box next to the   |                                       | this report |
| ✓ I hereby cert   | ify that I have received no con     | tributions and have mad                               | le no expenditures during t | his reporting period.                 |             |
| Section IV  |                                     | SUMMARY   |                             |                                       |             |
| To reach your Calendar Year to figures to the Column II figures                                       |                                     | Column I  | COLUMN I<br>This Period     | COLUMN II<br>Calendar Year<br>to Date |             |
| Line 1: Cash on Hand January  | 1, This Calendar Year*              |   | \$_XXXXXX                   | \$ <u>11,875.85</u>                   |             |
| Line 2: Enter Beginning Cash E  | Balance**                           |   | \$ <u>11,875.85</u>         | \$_XXXXXX                             |             |
| Line 3: Total Contributions (Ent  | er amount from line 5, page 2       | )   | \$_0.00                     | \$ 0.00                               |             |
| Line 4: Subtotal (Add lines 1, 2  | and 3)                              |   | \$_11,875.85                | \$ <u>11,875.85</u>                   |             |
| Line 5: Total Expenditures (Ent   | er amount from line 11, page 2      | 2)  | \$_0.00                     | \$ 0.00                               |             |
| Line 6: Enter Ending Cash Bala  | ance (Subtract line 5 from line     | 4)  | \$_11,875.85                | \$ <u>11,875.85</u>                   |             |
| Line 7: Outstanding Debt to Da  | te (Enter amount from line 18,      | , page 2)   | \$_0.00                     |                                       |             |
| *This same figure should be en<br>**This is the figure on line 6 of<br>Note: The closing cash balance | the last Campaign Financial D       | isclosure Report filed. If                            |                             |                                       |             |
|   | Section V                           |   |                             |                                       |             |
| Return This Report To:  |                                     |   |                             |                                       |             |
| Lawerence Denney<br>Secretary of State PO   |                                     | Katsilometes  | , hereby certif             | y that the information in th          | is          |
| Box 83720<br>Boise ID 83720-0080  |                                     | lame of Political Treasurer<br>mplete and correct Cam | paign Financial Disclosure  | Report as required by law             | <i>I</i> .  |
| Phone: (208) 334-2852<br>Fax: (208) 334-2282  |                                     |   | District Of a st            |                                       |             |
| 1 un. (200) 007-2202  |                                     |   | Digital Signature           | courer                                |             |
|   |                                     |   | Signature of Political Tre  | asuiti                                |             |

## **DETAILED SUMMARY**

## Name of Candidate or Committee: Tom Katsilometes for Idaho State Senate 29

|   |  | 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          |
| 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          |

|    | Expenditures  |          |
|----|---|----------|
| 6  | Unitemized Expenditures (Less than \$25) # of Expenditures O                            | + \$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 |
| 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 |

|             | 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 |
| <b>15</b> ) | 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  | Itemized Pledged Contributions this Period (Total of all Schedule F sheets) | + \$0.00 |
| 21) | Total Pledged Contributions this period                                     | = \$0.00 |