

786288

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: Barbara A. Fry
Office Sought (if candidate): Treasurer
District (if any):
Mailing Address: 2505 9th Avenue
City and Zip: Lewiston 83501
Home Phone: 746-2510
Work Phone: 799-3030
Name of Political Treasurer: Barbara A. Fry
Mailing Address: 2505 9th Avenue
City and Zip: Lewiston 83501
Home Phone: 746-2510
Work Phone: 799-3030

Change of address for: Candidate or Political Committee [] Political Treasurer []

Section II

TYPE OF REPORT

This filing is an: [X] Original [] Amendment
This report is for the period from 10, 18, 19 through 11, 12, 10
[] 7 Day Pre-Primary Report [] 30 Day Post-Primary Report [] October 10 Pre-General Report
[] 7 Day Pre-General Report [X] 30 Day Post-General Report [] Annual Report
[] Semi-Annual Report (Statewide Candidates Only)
Is this a Termination Report: [X] 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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand, Beginning Cash Balance, Total Contributions, Subtotal, Total Expenditures, Ending Cash Balance, and Outstanding Debt to Date.

*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

CERTIFICATION

Return This Report To:
Patty Weeks
Nez Perce County Clerk
1230 Main St - PO Box 896
Lewiston ID 83501
Phone: (208) 799-3020
Fax: (208) 799-3070

I, Barbara A. Fry, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Barbara A. Fry
Signature of Political Treasurer

1/4

DETAILED SUMMARY

Name of Candidate or Committee: Barbara A. Fry

		Total This Period
Contributions		
①	Unitemized Contributions (\$50 and less) # of Contributors _____	+ \$
②	Itemized Contributions (Total of all Schedule A sheets)	+ \$
③	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+ \$ 396.71
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)	= \$ 396.71

Expenditures		
⑥	Unitemized Expenditures (\$25 and less) # of Expenditures _____	+ \$
⑦	Itemized Expenditures (Total of all Schedule B sheets)	+ \$
⑧	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$ 396.71
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)	= \$ 396.71

Loans, Credit Cards and Debt		
⑫	Outstanding Balance from previous reporting period	+ \$
⑬	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+ \$
⑭	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+ \$
⑮	Subtotal	= \$ 0.00
⑯	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	- \$
⑰	Repayments of Credit Card and Debt this reporting period (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)	= \$ 0.00

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

**SCHEDULE C
IN-KIND CONTRIBUTIONS and EXPENDITURES**

Name of Candidate or Committee: Barbara A. Fry

Purpose Codes

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

1.	Contributor Name, Mailing Address and Zip Code	\$ 396.71
	10 / 27 / 10 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Nez Perce County Democrats 1120 Airway Dr., Lewiston, ID 83501	\$ 396.71 Calendar Year-To-Date
	Expenditure Name, Mailing Address and Zip Code	Purpose Code
	Steeley Print 201 C St., Lewiston, ID 83501	\$ 396.71 L & P
2.	Contributor Name, Mailing Address and Zip Code	\$ _____
	<input type="checkbox"/> Primary <input type="checkbox"/> General	\$ _____ Calendar Year-To-Date
	Expenditure Name, Mailing Address and Zip Code	Purpose Code
		\$ _____
3.	Contributor Name, Mailing Address and Zip Code	\$ _____
	<input type="checkbox"/> Primary <input type="checkbox"/> General	\$ _____ Calendar Year-To-Date
	Expenditure Name, Mailing Address and Zip Code	Purpose Code
		\$ _____
4.	Contributor Name, Mailing Address and Zip Code	\$ _____
	<input type="checkbox"/> Primary <input type="checkbox"/> General	\$ _____ Calendar Year-To-Date
	Expenditure Name, Mailing Address and Zip Code	Purpose Code
		\$ _____
Expenditure Total:		\$ 396.71
(Transfer the combined total of all Expenditures on Schedule C pages to the Detailed Summary, page 2 line 8)		
Contributor Total:		\$ 396.71
(Transfer the combined total of all Contributors on Schedule C pages to the Detailed Summary, page 2 line 3)		

INST. NO. 786288

FILED FOR RECORD
FEE NC REC. BY Barbara

2010 NOV 19 PM 4 43 Fry

PATTY O. WEEKS
RECORDER, NEZ PERCE CO. ID.

BY Smooke DEPUTY