

682194

C-2

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

Section I

Name of candidate or Political Committee and Chairperson: CAROL A. REED
Office Sought: COUNTY CLERK
District:
Mailing Address: 2110 POWERS AVE, LEWISTON, ID 83501
Home Phone: (208) 743-0737
Work Phone:
Name of Political Treasurer: LARRY W. MATTHEWS
Mailing Address: 901 PINE ST, LEWISTON, ID 83501
Home Phone: (208) 743-7300
Work Phone:

Section II

TYPE OF REPORT

Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the instructional manual for reporting periods and due dates.

This report is for the period from OCT. 1 21 02 through NOV. 15 02

- 7 Day Pre-Primary Report
7 Day Pre-General Report
Quarterly (April 30)
30 Day Post-Primary Report
30 Day Post-General Report
Quarterly (July 30)
October 10 Pre-General Report
Annual Report
Is this Report an amendment?
Is this a Termination Report?

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you have no contributions or expenditures during this reporting period, check the box next to the statement below, fill in the appropriate dates and sign this report.

I hereby certify that I have received no contributions and have made no expenditures during this reporting period from / / through / /

Section IV

SUMMARY

Table with 3 columns: Description, COLUMN I This Period, COLUMN II Calendar Year To Date. Rows include Cash on Hand, Cash Balance, Total Contributions, Subtotal, Total Expenditures, and Cash Balance at Close of Period.

\* This same figure should be entered on Line 1 of all reports filed this calendar year.
\*\* You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period.

Section V

CONTRIBUTIONS PLEDGED-INCURRED EXPENDITURES

Contributions Pledged during this reporting period but not yet received:
Incurred Expenditures during this reporting period but not yet paid:

Submit This Report To:

COUNTY ELECTIONS DEPARTMENT
NEZ PERCE COUNTY
PATTY O. WEEKS
P.O. BOX 808
LEWISTON, IDAHO 83501

Section VI

CERTIFICATION

I LARRY W. MATTHEWS hereby certify that the information in this report is a true, complete and correct Campaign Finance Disclosure Report as required by law

Signature of Political Treasurer

**DETAILED SUMMARY PAGE**

Name of Candidate or Committee CAROL A. REED Report Covering the Period From OCT. 21, 02 to NOV. 15, 02

**UNITEMIZED CONTRIBUTIONS**

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 1

Total Amount 0 60

**UNITEMIZED EXPENDITURES**

~~EXPENDITURES LESS THAN~~ Contributions of Twenty-Five Dollars (\$25.00) This Period

Total Number 0

Total Amount —

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <del>0 60</del>
Itemized Contributions (Total all Schedule A sheets)	\$ <u>1 00 00</u>
Total Contributions (Also enter this figure on page 1, Section IV, Line 3)	\$ <u>1 00 60</u>
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (Less than \$25) from top of page	\$ <u>0</u>
Itemized Expenditures (Total all Schedule B sheets)	\$ <u>191 31</u>
Total Expenditures (Also enter this figure on page 1, Section IV, Line 5)	\$ <u>191 31</u>

INST. NO. 682194  
FILED FOR RECORD

FEE NC REG. BY Larry Matthews

2002 DEC -3 A 8:40

PATTY O. WEEKS  
RECORDER, NEZ PERCE CO ID

BY Natham DEPUTY

## SCHEDULE B ITEMIZED EXPENDITURES Of Twenty-Five Dollars (\$25.00) or more This Period

Name of Candidate or Committee  
**CAROL A. REED**

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A Cash or Check	Column B In-Kind (Non-monetary)
11, 04, 02	<sup>1</sup> LEWISTON MORNING TRIBUNE 505 E ST. LEWISTON, ID 83501	\$ 58.00	\$
Purpose of Expenditure: ELECTION "THANK YOU" ADS			
11, 04, 02	<sup>2</sup> LEWISTON MORNING TRIBUNE 505 E ST. LEWISTON, ID 83501	\$ 42.58	\$
Purpose of Expenditure: ELECTION THANK YOUS			
11, 15, 02	<sup>3</sup> CAROL A. REED 2110 POWERS AVE LEWISTON, ID 83501	\$ 60.00	\$
Purpose of Expenditure: PAY ARMNOT LOAN			
11, 15, 02	<sup>4</sup> CAROL A. REED 2110 POWERS AVE LEWISTON, ID 83501	\$ 30.73	\$
Purpose of Expenditure: PAY AGAINST LOAN			
/ /	<sup>5</sup>	\$	\$
Purpose of Expenditure:			
/ /	<sup>6</sup>	\$	\$
Purpose of Expenditure:			
/ /	<sup>7</sup>	\$	\$
Purpose of Expenditure:			
/ /	<sup>8</sup>	\$	\$
Purpose of Expenditure:			
/ /	<sup>9</sup>	\$	\$
Purpose of Expenditure:			
Subtotals of Columns A & B		\$ 191.31	\$
Total This Page (add columns A & B)		\$ 191.31	\$

## SCHEDULE A ITEMIZED CONTRIBUTIONS

Of more than Fifty Dollars (\$50.00) This Period

Name of Candidate or Committee: CAROL A. REED

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A Cash or Check	Column B In-Kind (Non-monetary)	Column C Loans
11/05/02	1. LEAGUE OF REPUBLICAN WOMAN 3424 9th ST LEWISTON, ID 83501	\$ 100.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 300.00 Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
/ /	2.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
/ /	3.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
/ /	4.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
/ /	5.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
/ /	6.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
/ /	7.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
/ /	8.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
/ /	9.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
/ /	10.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar year To Date	\$ Calendar year To Date	\$ Calendar year To Date
Subtotals of Columns A, B, & C		\$ 100.00	\$	\$
Total This Page (add columns A, B & C				\$ 100.00