



**INDEPENDENT EXPENDITURES  
TOTALING MORE THAN \$100  
MADE IN SUPPORT OF -OR- IN OPPOSITION TO  
ANY CANDIDATE, POLITICAL COMMITTEE OR MEASURE**

**C-4**

Please see the definition of independent expenditure in I.C. 67-6602(11), along with filing requirements in I.C. 67-6611.

**PURPOSE CODES**

<b>A</b> All Travel Expenses (Airfare, Fuel, Lodging, & Mileage)	<b>N</b> Newspaper & Other Periodical Advertising
<b>B</b> Broadcast Advertising (Radio, TV, Internet, & Telephone)	<b>O</b> Other Advertising (Yard Signs, Buttons, etc.)
<b>C</b> Contributions to Candidates & PACs	<b>P</b> Postage
<b>D</b> Donations & Gifts	<b>S</b> Surveys & Polls
<b>E</b> Event Expenses	<b>T</b> Tickets (Events)
<b>F</b> Food & Refreshments	<b>U</b> Utilities
<b>G</b> General Operational Expenses	<b>W</b> Wages, Salaries, Benefits, & Bonuses
<b>I</b> Interest Accrued & Finance Charges	<b>Y</b> Petition Circulators
<b>L</b> Literature, Brochures, Printing	<b>Z</b> Preparation & Production of Advertising
<b>M</b> Management Services	

**GENERAL INFORMATION**

**Name of Candidate or Committee**

\_\_\_\_\_

**Mailing Address**

Street Address	City	State	Zip Code
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**INDEPENDENT EXPENDITURE IN EXCESS OF ONE HUNDRED DOLLARS (\$100) I.C. 67-6611(1)**

Date Expended	Full Name, Mailing Address, & Zip Code to whom expenditure was made	Purpose Code(s)	Amount
<b>Name of Candidate/Measure</b>			
<input type="checkbox"/> Supported <input type="checkbox"/> Opposed			

**CERTIFICATION**

I, \_\_\_\_\_, hereby certify that the information in this report is true, complete and correct.  
(Name of Political Treasurer)

Signature of Political Treasurer	Date Signed
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**RETURN THIS FORM TO**

Secretary of State  
Elections Division  
PO Box 83720  
Boise, ID 83720-0080

**Phone:** (208) 334-2852  
**Fax:** (208) 334-2282