

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

**Section I**

Name of candidate or Political Committee and Chairperson <b>TERRY LEE KERR</b>	Office Sought (if candidate) <b>SHERIFF</b>	District (if any) <b>BONNEVILLE</b>
Mailing Address <b>2895 Woodbridge, Idaho Falls, ID 83401</b>	Home Phone <b>522-6914</b>	Work Phone
Name of Political Treasurer <b>NONE</b>		
Mailing Address	City and Zip	Home Phone Work Phone

Change of address for:  Candidate or Political Committee  Political treasurer

**Section II**

**TYPE OF REPORT**

This filing is an:  Original  Amendment  
This report is for the period from 9/120/08 through 5/20/08

- 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 Report  
 Semi Annual report (Statewide Candidates Only)  
 Is this Report an amendment?  Yes  No      Is this a Termination Report?  Yes  No

**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 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).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Calendar Year*	\$ XXXXXXXXXXXX	\$
Line 2. Enter Cash Balance at Close of Last Reporting Period **	\$	\$ XXXXXXXXXXXX
Line 3. Total Contributions (Enter amount from line 5, Page 2)	\$	\$
Line 4. Subtotal (Add lines 1, 2 and 3)	\$ NONE	\$ NONE
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$	\$
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$	\$
Line 7. Outstanding Debt to Date (Enter amount from line 18, page 20)	\$	\$

\* 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 beginning cash on hand.

Return This Report To:  
**Ronald Longmore**  
 Bonneville County Clerk  
 605 N. Capital Ave.  
 Idaho Falls, ID 83402  
 Phone: 208-529-1363  
 Fax: 208-529-1188

**Section V**

**CERTIFICATION**

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

Terry Kerr  
 Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee: Terry Ze Ken

	Total This Period
<b>Contributions</b>	
(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)	+ \$
(4) Loans (Total of all New Loan amounts from Schedule D sheets)	+ \$
(5) <b>Total Contributions</b> (Transfer this figure to page 1, Section IV, Line 3)	= \$

<b>Expenditures</b>	
(6) Unitemized Expenditures # of Expenditures _____	+ \$
(7) Itemized Expenditures (Total of all Schedule B sheets)	+ \$
(8) In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$
(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) <b>Total Expenditures</b> (Transfer this figure to page 1, Section IV, Line 5)	= \$

<b>Loans, Credit Cards and Debt</b>	
(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 sheet)	+ \$
(14) New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+ \$
(15) <b>Subtotal</b>	= \$
(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) <b>Total Outstanding Balance</b> at close of this period (Transfer this figure to page 1, Section IV, Line 7)	= \$

<b>Pledged Contributions</b>	
(19) Unitemized Pledged Contributions (\$50 and less) # of Pledges _____	+ \$
(20) Itemized Pledged Contributions (Total of all Schedule F sheets)	+ \$
(21) <b>Total Pledged Contributions this period</b>	+ \$

## INDEPENDENT EXPENDITURES

(Please note the definition of independent expenditures and Section 67-6611, Idaho Code-reverse side)

Totaling More Than \$100  
Made in Support of or in Opposition to  
Any One Candidate, Political Committee or Measure

Full Name: Terry Lee Kern Telephone No: 522-6914  
Mailing Address and Zip Code: 2896 Woodbridge Idaho Falls, ID 83401

### TYPE OF REPORT

- 7 Day Pre-Primary Statement                       7 Day Pre-General Statement  
 30 Day Post-Primary Statement                       30 Day Post-General Statement

Purpose Codes	B Broadcast Advertising (Radio, TV, Internet) E Event Expenses F Food & Refreshments L Literature, Brochures, Printing N Newspaper & Other Periodical Advertising	O Other Advertising P Postage S Surveys & Polls Z Preparation & Production of Advertising
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### ITEMIZED EXPENDITURES IN EXCESS OF FIFTY DOLLARS

Date	Full Name, Mailing Address and Zip Code of Recipient	Candidate or Measure Supported or Opposed	Purpose Code	Amount
_/_/_	1. <u>NONE</u>			\$
_/_/_	2.			\$
_/_/_	3.			\$
_/_/_	4.			\$
_/_/_	5.			\$

Submit This Report To:

**Ronald Longmore**  
**Bonneville County Clerk**  
**605 N. Capital Ave.**  
**Idaho Falls, ID 83402**  
**Phone: 208-529-1363**  
**Fax: 208-529-1188**

Total Expenditure(s): \$

I, Terry Kern, hereby certify that the information in this report is true, complete and correct.

Terry Kern  
 Signature of Political Treasurer

## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED Of One Thousand Dollars (\$1,000.00) Or More

Directions: Use this form to report any contribution of one thousand dollars (\$1,000) or more received after the sixteenth (16<sup>th</sup>) day before, but not more than forty-eight hours before, any primary or general election. Notification must be made within forty-eight (48) hours after receipt of such contribution. (Section 67-6607(c), Idaho Code.)

<b>2008 Elections</b>		This requirement applies to all types of contributions, including but not limited to: <ul style="list-style-type: none"> <li>Cash contributions</li> <li>In-kind contributions</li> <li>Loans</li> <li>Contributions or personal loans made by the candidate</li> </ul>
48 Hour Notice required for contributions received:		
Primary Election	May 12, 2008 through May 20, 2008	
General Election	October 20, 2008 through November 1, 2008	

Name of Candidate or Committee <i>Terry Ken</i>	District (If Applicable) <i>Bonneville</i>
Mailing Address <i>2895 wood Bridge School St. Ft. 83401</i>	
City, State and Zip Code	

Date Received	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (Non-monetary)	Loan
_/_/_	1. <i>NONE</i>	\$	\$ _____	\$
_/_/_	2.	\$	\$ _____	\$
_/_/_	3.	\$	\$ _____	\$

**Submit Report To:**

**Ronald Longmore**  
**Bonneville County Clerk**  
 605 N. Capital Ave.  
 Idaho Falls, ID 83402  
 Phone: 208-529-1363  
 Fax: 208-529-1188

I, *Terry Ken*, hereby certify that the information  
Name of Political Treasurer  
 in this report is a true, complete and correct

*Terry Ken*  
Signature of Political Treasurer

## STATEMENT BY A NONBUSINESS ENTITY

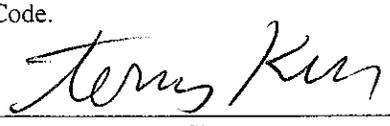
(Type or Print Clearly)  
See Instructions at bottom of Page

Name and Address of Nonbusiness Entity				
Name	Address	City	State	Zip
NONE				

Name and Address of Principal Officer or Directors				
Name	Address	City	State	Zip
NONE				

List the name and address of each person whose fees, dues, payments or other consideration paid to the nonbusiness entity during either of the prior two (2) calendar years has exceeded \$500; or who is obligated to or has agreed to pay fees, dues, payments or other consideration exceeding \$500 to such entity during the current year.

Name	Address	City	State	Zip
NONE				

INSTRUCTIONS	Certification: I hereby certify that the information contained herein is a true, correct and complete statement in accordance with Section 67-6624, Idaho Code.
<p><b>Who should file this form?</b> Any nonbusiness entity domiciled in the State of Idaho, which makes expenditures in the amount exceeding one thousand dollars (\$1,000) in any calendar year for the purpose of supporting or opposing one (1) or more candidates or measures. <b>(Please Note: the definition of nonbusiness entity and Section 67-6606, I.C. – reverse side)</b></p> <p><b>Filing Deadline:</b> This statement shall be filed within thirty (30) days of exceeding the one thousand dollar (\$1,000) threshold.</p> <p><b>To Be Filed With:</b>  <b>Ronald Longmore</b>  <b>Bonneville County Clerk</b>  <b>605 N. Capital Ave.</b>  <b>Idaho Falls, ID 83402</b>  <b>Phone: 208-529-1363</b>  <b>Fax: 208-529-1188</b></p>	<div style="text-align: center; margin-top: 20px;">               _____              Signature         </div> <div style="text-align: center; margin-top: 20px;">             _____              Title         </div> <div style="text-align: center; margin-top: 20px;">             _____              Date         </div>

## INDEPENDENT EXPENDITURES 48 HOUR NOTICE

(Please note the definition of independent expenditures and Section 67-6611, Idaho Code-reverse side)

Totaling More Than \$1000.  
Made in Support of or in Opposition to  
Any One Candidate, Political Committee or Measure

Full Name: Terry Korn Telephone No: 522-6914  
Mailing Address and Zip Code: 2895 road Bridge, Idaho Falls, ID 83401

2008 Elections  
48 Hour Notice required for expenditures made:

Primary Election – May 12, 2008 through May 24, 2008      General Election – October 20, 2008 through November 1, 2008

Purpose Codes	B Broadcast Advertising (Radio, TV, Internet) E Event Expenses F Food & Refreshments L Literature, Brochures, Printing N Newspaper & Other Periodical Advertising	O Other Advertising P Postage S Surveys & Polls Z Preparation & Production of Advertising
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### ITEMIZED EXPENDITURES IN EXCESS OF FIFTY DOLLARS

Date	Full Name, Mailing Address and Zip Code of Recipient	Candidate or Measure Supported or Opposed	Purpose Code	Amount
_/_/_	1. <span style="font-size: 2em; font-family: cursive;">NONE</span>		—	\$ _____
_/_/_	2.		—	\$ _____
_/_/_	3.		—	\$ _____
_/_/_	4.		—	\$ _____
_/_/_	5.		—	\$ _____ <span style="font-size: 2em; font-family: cursive;">NONE</span>

Submit This Report To:  
  
**Ronald Longmore**  
**Bonneville County Clerk**  
 605 N. Capital Ave.  
 Idaho Falls, ID 83402  
 Phone: 208-529-1363  
 Fax: 208-529-1188

Total Expenditure(s): \$ \_\_\_\_\_

I Terry Korn, hereby certify that the information in this report is a true, complete and correct.

Terry Korn  
Signature

**SCHEDULE A  
ITEMIZED CONTRIBUTIONS**

Of more than fifty dollars (\$50.00) this period

Name of Candidate or Committee: Terry Kern

Date Received	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	
____/____/____	1.	\$ _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<i>NONE</i>	\$ _____ Calendar year To Date	
____/____/____		2.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar year To Date	
____/____/____		3.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar year To Date	
____/____/____		4.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar year To Date	
____/____/____		5.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar year To Date	
____/____/____		6.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	\$ _____ Calendar year To Date		
____/____/____	7.	\$ _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	\$ _____ Calendar year To Date		
____/____/____	8.	\$ _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	\$ _____ Calendar year To Date		
____/____/____	9.	\$ _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	\$ _____ Calendar year To Date		
____/____/____	10.	\$ _____	
<input type="checkbox"/> Primary <input type="checkbox"/> General	\$ _____ Calendar year To Date		
<b>Total This Page:</b>		\$ <i>NONE</i>	

Transfer the combined total of all Schedule A pages to the Detailed Summary on page 2, line 2

# SCHEDULE B ITEMIZED EXPENDITURES

Of Twenty-Five Dollars (\$25.00) or more this period

**Name of Candidate or Committee:** Terry Kern

**Purpose Codes**

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>A. All Travel Expenses (Airfare, Fuel, Lodging &amp; Mileage)</li> <li>B. Broadcast Advertising (Radio, TV &amp; Internet)</li> <li>C. Contributions to Candidates &amp; PAC's</li> <li>D. Donations &amp; Gifts</li> <li>E. Event Expenses</li> <li>F. Food &amp; Refreshments</li> <li>G. General Operational Expenses</li> <li>L. Literature, Brochures, Printing</li> <li>M. Management Services</li> </ul> | <ul style="list-style-type: none"> <li>N. Newspaper &amp; Other Periodical Advertising</li> <li>O. Other Advertising (Yard Signs, Buttons, etc.)</li> <li>P. Postage</li> <li>S. Surveys &amp; Polls</li> <li>T. Tickets (Events)</li> <li>U. Utilities</li> <li>W. Wages, Salaries, Benefits &amp; Bonuses</li> <li>Y. Petition Circulators</li> <li>Z. Preparation &amp; Production of Advertising</li> </ul> |
|--|---|

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
_ / _ /	1. <span style="font-size: 2em; font-family: cursive;">NONE</span>	—	\$ _____
_ / _ /	2.	—	\$ _____
_ / _ /	3.	—	\$ _____
_ / _ /	4.	—	\$ _____
_ / _ /	5.	—	\$ _____
_ / _ /	6.	—	\$ _____
_ / _ /	7.	—	\$ _____
_ / _ /	8.	—	\$ _____
_ / _ /	9.	—	\$ _____
_ / _ /	10.	—	\$ _____
Total This Page			\$ <span style="font-size: 1.5em; font-family: cursive;">NONE</span>

Transfer the combined total of all Schedule B pages to the Detailed Summary on page 2, line 7

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

Name of Candidate or Committee: Terry Kern

**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. ___/___/___ <input type="checkbox"/> Primary <input type="checkbox"/> General	Contributor Name, Mailing Address & Zip Code: <p align="center"><b>HOME</b></p>		\$ _____ \$ _____ Calendar Year-To-Date _____
	Expenditure Name, Mailing Address and Zip Code	\$ _____	<b>Purpose Code</b> _____
2. ___/___/___ <input type="checkbox"/> Primary <input type="checkbox"/> General	Contributor Name, Mailing Address & Zip Code:		\$ _____ \$ _____ Calendar Year-To-Date _____
	Expenditure Name, Mailing Address and Zip Code	\$ _____	<b>Purpose Code</b> _____
3. ___/___/___ <input type="checkbox"/> Primary <input type="checkbox"/> General	Contributor Name, Mailing Address & Zip Code:		\$ _____ \$ _____ Calendar Year-To-Date _____
	Expenditure Name, Mailing Address and Zip Code	\$ _____	<b>Purpose Code</b> _____
4. ___/___/___ <input type="checkbox"/> Primary <input type="checkbox"/> General	Contributor Name, Mailing Address & Zip Code:		\$ _____ \$ _____ Calendar Year-To-Date _____
	Expenditure Name, Mailing Address and Zip Code	\$ _____	<b>Purpose Code</b> _____
<b>Expenditure Total:</b> (Transfer the combined total of all Expenditures on Schedule C pages to Detailed Summary, page 2, line 8)		\$ _____	
<b>Contributor Total:</b> (Transfer the combined total of all Contributors on Schedule C pages to Detailed Summary, page 2, line 3)		\$ _____	<b>HOME</b>

## SCHEDULE D LOANS

Each Lender to your campaign should be listed separately. Each time a loan is received or you loan money to the campaign, it must be listed as a separate item. Each new loan from any Lender must be listed as a new item from that Lender. You may have the same lender listed more than once. **Except for a candidate making a loan to his or her own campaign, loans from any Lender cannot exceed contribution limits laid out in Section 67-6610A, Idaho Code, even if it is repaid.**

Any loan(s) with a balance(s) appearing on the last report must be listed below with the amounts in the Previous Balance column. Any new loan amounts should be listed in the New Loan column. Any interest accrued should be listed in the Interest Accrued column. If a payment was made on the loan, list it in the Repayments column. **Note: Any loan that was repaid in full in a previous reporting period does not need to be listed.** The Outstanding Balance column is the Previous Balance plus new loans and accrued interest less any repayments.

Name, Mailing Address and Zip Code of Lender Candidate, Individual or Business	Previous Balance of the loan at the end of the last reporting period	New Loan amount received during this reporting period	Interest accrued during this reporting period	Repayments of Loan during this reporting period	Balance Outstanding at the end of this reporting period
1. <i>NONE</i>	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
2. <i>NONE</i>	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
3.	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
4.	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
5.	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
6.	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
7.	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
<b>Previous Total:</b>	<b>Previous</b> \$ _____	<b>Received</b>	<b>Interest</b>	<b>Repayments</b>	<b>Ending Balance</b>

Received Total:  
(Transfer the combined total of all received loans to the Detailed Summary, page 2, line 4)

\$ \_\_\_\_\_

Interest Total: \$ \_\_\_\_\_

Repayments Total:  
(Transfer the combined total of all loan repayments to the Detailed Summary, page 2, line 9 & 16)

\$ \_\_\_\_\_

Ending Balance:

*NONE*  
\$ \_\_\_\_\_

**(NOTE: Transfer the combined total of all Accrued Interest and Received Loans to the Detailed Summary, page 2, line 13)**

## SCHEDULE E CREDIT CARDS and DEBT

Each incurred expense not yet paid (i.e. credit card purchases and debt) should be listed on a separate line. Each time you make purchases with a credit card or incur debt, it is considered to be a separate item. However, you will maintain a single item for each credit card and add purchases to that item. Each Creditor listed below with a New Debt amount must have a Schedule E-1 accompanying it. The Schedule E-1 lists where the debt was incurred.

Credit Cards are considered Debt to the campaign. Regardless of whether the credit card is repaid when the statement is received, all credit card transactions will appear on Schedule E and E-1. However, only Repayments of Debt during this reporting period appear in the Expenditure Section of the Detailed Summary Page.

Any creditor(s) with a balance(s) appearing on the last report must be listed below with the amount in the Previous Balance column. Any new debt should be listed in the New Debt column, including any accrued interest. If a payment was made on the debt, list it in the Repayments column.

**NOTE: Any debt that was repaid in full in a previous reporting period does not need to be listed.** The Outstanding Balance column is the Previous Balance plus New Debt less any Repayments of Debt.

Name, Mailing Address and Zip Code of Lender Candidate, Individual or Business	Previous Balance of debt at the end of the last reporting period	New Debt amount incurred during this reporting period	Repayments of Debt during this reporting period	Balance Outstanding at the end of this reporting period
1. <i>NONE</i>	\$ _____	Date: ____/____/____ Amount: \$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
2.	\$ _____	Date: ____/____/____ Amount: \$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
3.	\$ _____	Date: ____/____/____ Amount: \$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
4.	\$ _____	Date: ____/____/____ Amount: \$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
5.	\$ _____	Date: ____/____/____ Amount: \$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____
6.	\$ _____	Date: ____/____/____ Amount: \$ _____	Date: ____/____/____ Amount: \$ _____	\$ _____

	<b>Previous</b>	<b>Incurred</b>	<b>Repayments</b>	<b>Ending Balance</b>
Previous Total	\$ _____			
Incurred Total: (Transfer combined total of all incurred debt to the Detailed Summary, page 2, line 14)		\$ _____		
Repayments Total: (Transfer the combined total of all debt repayments to the Detailed Summary, page 2, line 10 & 17)			\$ _____	
Ending Balance Total:				\$ _____ <i>NONE</i>

**SCHEDULE E-1  
CREDIT CARD and DEBT ITEMIZATION**

Name of Creditor from Schedule E: Terry Kerr

Each Creditor listed on Schedule E with a New Debt amount must have a Schedule E-1 accompanying it. The Schedule E-1 lists where and when the debt was incurred.

**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           |
| I. Interest Accrued & Finance Charges (enclosed)          | Y. Petition Circulators                          |
| L. Literature, Brochures, Printing                        | Z. Preparation & Production of Advertising       |
| M. Management Services                                    |  |

Date Incurred	Full Name, Mailing Address, and Zip Code of Expenditures	Purpose Code	Amount
___/___/___	1. <b>NONE</b>	___	\$ ___
___/___/___	2.	___	\$ ___
___/___/___	3.	___	\$ ___
___/___/___	4.	___	\$ ___
___/___/___	5.	___	\$ ___
___/___/___	6.	___	\$ ___
___/___/___	7.	___	\$ ___
___/___/___	8.	___	\$ ___
___/___/___	9.	___	\$ ___

Total This Page \$ **NONE**

The total of itemization for this creditor should equal the new loan amount listed on Schedule E for this creditor.

**SCHEDULE F  
PLEGGED CONTRIBUTIONS BUT NOT YET RECEIVED**

Name of Candidate or Committee: Terry Kern

**Directions:** Complete this schedule if you were promised and agreed to accept a contribution during this reporting period but have not actually received the money, goods or services offered before the end of the reporting period. Do not include these entries on Schedule A until you actually receive the contribution.

Pledged For	Date Pledged	Full Name, Mailing Address and Zip Code of Contributor	Amount Pledged
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	1. <b>NONE</b>	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	2.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	3.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	4.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	5.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	6.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	7.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	8.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	9.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	10.	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	11.	\$ _____

**Total Amount of Pledged Contributions**      \$ NONE

Transfer the combined total of all Schedule F to the Detailed Summary, page 2, line 20.

## REPORT OF ELECTIONEERING COMMUNICATION

For use by a person who has expended \$100 or more per year on electioneering communications.

Any person incurring costs of \$1,000 or more must file within 48 hours of incurring costs.

Name of person/entity NONE

Address (Physical) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

### TYPE OF REPORT:

- 7-day Pre-Primary       30-day Post-Primary       48 Hour Report
- 7-day Pre-PrimaryGeneral       30-day Post General

Is this an amended report?  No       Yes

This amends a previous report filed on NONE

Date of Public Distribution(s) \_\_\_\_\_

Total Expenditures this Statement	\$ _____
Total Itemized Contributions of \$50 or More this Statement	\$ _____
Total Contributions this Statement	\$ _____

I \_\_\_\_\_ hereby certify that the information in this  
Name of Individual Completing Report  
report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

\_\_\_\_\_  
Signature of Individual Completing Report

NONE  
Date Signed

**Submit Report To:**

**Ronald Longmore**  
**Bonneville County Clerk**  
**605 N. Capital Ave.**  
**Idaho Falls, ID. 83402**  
**Phone: 208-529-1363**  
**Fax: 208-529-1188**



ITEMIZED EXPENDITURES FOR ELECTIONEERING COMMUNICATIONS

Name of Person/Entity \_\_\_\_\_

*None*

1. Date Expended ____/____/____	3. Name (last, first) _____
2. Amount \$ _____	4. Address _____
Cash <input type="checkbox"/>	5. City/State/Zip _____
In-Kind <input type="checkbox"/>	6. Method of Communication(s) _____
	7. Name of Candidate(s) referred to _____
	8. Support _____ Oppose _____
	9. Purpose of Expenditure _____

1. Date Expended ____/____/____	3. Name (last, first) _____
2. Amount \$ _____	4. Address _____
Cash <input type="checkbox"/>	5. City/State/Zip _____
In-Kind <input type="checkbox"/>	6. Method of Communication(s) _____
	7. Name of Candidate(s) referred to _____
	8. Support _____ Oppose _____
	9. Purpose of Expenditure _____

1. Date Expended ____/____/____	3. Name (last, first) _____
2. Amount \$ _____	4. Address _____
Cash <input type="checkbox"/>	5. City/State/Zip _____
In-Kind <input type="checkbox"/>	6. Method of Communication(s) _____
	7. Name of Candidate(s) referred to _____
	8. Support _____ Oppose _____
	9. Purpose of Expenditure _____

1. Date Expended ____/____/____	3. Name (last, first) _____
2. Amount \$ _____	4. Address _____
Cash <input type="checkbox"/>	5. City/State/Zip _____
In-Kind <input type="checkbox"/>	6. Method of Communication(s) _____
	7. Name of Candidate(s) referred to _____
	8. Support _____ Oppose _____
	9. Purpose of Expenditure _____

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

**Section I**

Name of candidate or Political Committee and Chairperson <b>TERRY KERR</b>	Office Sought (if candidate) <b>SENATOR</b>	District (if any)
Mailing Address <b>2895 Woodbridge, Idaho Falls</b>	Home Phone <b>522-6914</b>	Work Phone
Name of Political Treasurer		
Mailing Address	City and Zip	Home Phone Work Phone

Change of address for:  Candidate or Political Committee  Political treasurer

**Section II**

**TYPE OF REPORT**

This filing is an:  Original  Amendment  
 This report is for the period from 5, 12, 08 through 6, 26, 08

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 Report  
 Semi Annual report (Statewide Candidates Only)

Is this Report an amendment?  Yes  No      Is this a Termination Report?  Yes  No

**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 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).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Calendar Year*	\$ XXXXXXXXXXXX	\$
Line 2. Enter Cash Balance at Close of Last Reporting Period **	\$	\$ XXXXXXXXXXXX
Line 3. Total Contributions (Enter amount from line 5, Page 2)	\$	\$
Line 4. Subtotal (Add lines 1, 2 and 3)	\$ 0	\$
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$	\$ 0
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$ 0	\$ 0
Line 7. Outstanding Debt to Date (Enter amount from line 18, page 20)	\$	\$

\* 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 beginning cash on hand.

Return This Report To:  
  
**Ronald Longmore**  
**Bonneville County Clerk**  
**605 N. Capital Ave.**  
**Idaho Falls, ID 83402**  
**Phone: 208-529-1363**  
**Fax: 208-529-1188**

**Section V CERTIFICATION**

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

Terry Kerr  
Signature of Political Treasurer

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

**Section I**

Name of candidate or Political Committee and Chairperson <b>TERRY LEE KERR</b>		Office Sought (if candidate) <b>SHERRIFF</b>	District (if any) <b>Bonneville</b>
Mailing Address <b>2895 Wood Bridge, Idaho Falls, ID</b>		Home Phone <b>522624</b>	Work Phone
Name of Political Treasurer			
Mailing Address		Home Phone	Work Phone

Change of address for:  Candidate or Political Committee  Political treasurer

**Section II**

**TYPE OF REPORT**

This filing is an:  Original  Amendment  
This report is for the period from 5/10/08 through 10/10/08

- 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 Report
- Semi Annual report (Statewide Candidates Only)
- Is this Report an amendment?  Yes  No    Is this a Termination Report?  Yes  No

**Section III STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES**

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**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).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Calendar Year*	\$ XXXXXXXXXXXX	\$
Line 2. Enter Cash Balance at Close of Last Reporting Period **	\$	\$ XXXXXXXXXXXX
Line 3. Total Contributions (Enter amount from line 5, Page 2)	\$	\$
Line 4. Subtotal (Add lines 1, 2 and 3)	\$	\$
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$	\$
Line 6. Cash balance at Close of Period (Subtract Line 5 from Line 4)**	\$	\$
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**605 N. Capital Ave.**  
**Idaho Falls, ID 83402**  
**Phone: 208-529-1363**  
**Fax: 208-529-1188**

**Section V CERTIFICATION**

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

Terry Lee Kerr  
Signature of Political Treasurer

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

**Section I**

Name of candidate or Political Committee and Chairperson <b>TEARY KERR</b>	Office Sought (if candidate) <b>SHERIFF</b>	District (if any) <b>DONNVILLE</b>
Mailing Address <b>2895 Woodbridge Idaho Falls</b>	Home Phone <b>522-6914</b>	Work Phone
Name of Political Treasurer <b>TP. 83401</b>		
Mailing Address	City and Zip	Home Phone
		Work Phone

Change of address for:  Candidate or Political Committee  Political treasurer

**Section II TYPE OF REPORT**

This filing is an:  Original  Amendment  
 This report is for the period from \_\_\_/\_\_\_/\_\_\_ through \_\_\_/\_\_\_/\_\_\_

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 Report  
 Semi Annual report (Statewide Candidates Only)

Is this Report an amendment?  Yes  No      Is this a Termination Report?  Yes  No

**Section III STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES**

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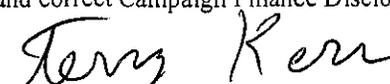
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 Bonneville County Clerk  
 605 N. Capital Ave.  
 Idaho Falls, ID 83402  
 Phone: 208-529-1363  
 Fax: 208-529-1188

**Section V CERTIFICATION**

I TEARY KERR, 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

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

**Section I**

Name of candidate or Political Committee and Chairperson <b>TERRY KERR</b>	Office Sought (if candidate) <b>Sherriff</b>	District (if any)
Mailing Address <b>2895 Woodbine</b>	City and Zip	Home Phone Work Phone
Name of Political Treasurer <b>Edwina Pelt, FDDA, 83401</b>		
Mailing Address	City and Zip	Home Phone Work Phone

Change of address for:  Candidate or Political Committee  Political treasurer

**Section II**

**TYPE OF REPORT**

This filing is an:  Original  Amendment  
This report is for the period from \_\_\_\_\_ through \_\_\_\_\_

- 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 Report

Semi Annual report (Statewide Candidates Only)

Is this Report an amendment?  Yes  No    Is this a Termination Report?  Yes  No

**Section III STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES**

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Idaho Falls, ID 83402  
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Fax: 208-529-1188

**Section V**

**CERTIFICATION**

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

*Terry Kerr*  
\_\_\_\_\_  
Signature of Political Treasurer