

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

08 OCT 21 AM 11:17

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

[Empty box]

Mike Crapo for U.S. Senate

ADDRESS (number and street)

P.O. Box 1948

Check if different than previously reported. (ACC)

Boise

ID

83701

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00330886

3. IS THIS REPORT

[X]

NEW (N)

OR

[ ]

AMENDED (A)

STATE DISTRICT

ID

[ ]

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

[ ]

April 15 Quarterly Report (Q1)

[ ]

July 15 Quarterly Report (Q2)

[X]

October 15 Quarterly Report (Q3)

[ ]

January 31 Year-End Report (YE)

[ ]

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

[ ]

Primary (12P)

[ ]

General (12G)

[ ]

Runoff (12R)

[ ]

Convention (12C)

[ ]

Special (12S)

Election on

[ ] [ ] [ ]

in the State of

[ ]

(c) 30-Day POST-Election Report for the:

[ ]

General (30G)

[ ]

Runoff (30R)

[ ]

Special (30S)

Election on

[ ] [ ] [ ]

in the State of

[ ]

5. Covering Period

07

01

2008

through

09

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

William Corbett

Signature of Treasurer

[Handwritten signature]

Date

10

14

2008

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

FE5AN018

28020644010

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Mike Crapo for U.S. Senate

Report Covering the Period:

From:

MM 07 DD 01 YYYY 2008

To:

MM 09 DD 30 YYYY 2008

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	50496.45	1090817.14
(b) Total Contribution Refunds (from Line 20(d)).....	500.00	6500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	49996.45	1084317.14
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	57711.21	781615.67
(b) Total Offsets to Operating Expenditures (from Line 14).....	2397.27	23792.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	55313.94	757822.76
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	1799377.44	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

28020644011

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name  
Mike Crapo for U.S. Senate

Report Covering the Period: From: 

M	M
07	

D	D
01	

Y	Y	Y	Y
2008			

 To: 

M	M
09	

D	D
30	

Y	Y	Y	Y
2008			

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	17455.00	531072.36
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	17455.00	531072.36
(iii) TOTAL of contributions from Individuals..... ▶	0.00	1916.40
(b) Political Party Committees.....	33041.45	557828.38
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	50496.45	1090817.14
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	100.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	2397.27	23792.91
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	5237.47	175875.06
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	58131.19	1290585.11

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**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	57711.21	781615.67
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	500.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500.00	6500.00
21. OTHER DISBURSEMENTS.....	0.00	75137.13
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▷	58211.21	863252.80

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1799457.46
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	58131.19
25. SUBTOTAL (add Line 23 and Line 24).....	1857588.65
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	58211.21
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1799377.44

28020644013

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
John Adamson

Mailing Address PO Box 273

City State Zip Code  
Carey ID 83320-0273

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
15.00

Date of Receipt

MM / DD / YYYY  
07 / 01 / 2008

Transaction ID: ABC55BDB9F4434151862

Amount of Each Receipt this Period

15.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)  
Jack Ambrosiani

Mailing Address 1075 W. Oden Bay Rd.

City State Zip Code  
Sandpoint ID 83864-6496

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Cygnus In. President  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt

MM / DD / YYYY  
09 / 01 / 2008

Transaction ID: A756877AB45C34DD7AD5

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)  
Marcia Frenz Argust

Mailing Address 477 E. Taylor Run Pkwy

City State Zip Code  
Alexandria VA 22314-4928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Campaign for Amer Wildem-  
ess Govt. Affairs Rep.  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

Date of Receipt

MM / DD / YYYY  
08 / 07 / 2008

Transaction ID: ABCD6ED833EAE4520AB1

Amount of Each Receipt this Period

500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1515.00

TOTAL This Period (last page this line number only) ▶

28020644014

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. William Armour</p> <p>Mailing Address 605 Murdock</p> <p>City State Zip Code Idaho Falls ID 83402-5443</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self Occupation Physician</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 30 / 2008</p> <p>Transaction ID: A5B7663336DA0446588B</p> <p>Amount of Each Receipt this Period 200.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Howard Barton</p> <p>Mailing Address 28 St. James Pl</p> <p>City State Zip Code Oneonta NY 13820-3250</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 30.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 01 / 2008</p> <p>Transaction ID: A3D657B3CC15B42B3994</p> <p>Amount of Each Receipt this Period 30.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Mr. Clifton Boutelle</p> <p>Mailing Address 2821 Erin Ave</p> <p>City State Zip Code Nampa ID 83686-8547</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Unknown</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 50.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 01 / 2008</p> <p>Transaction ID: A6891C8C72AAA495B91F</p> <p>Amount of Each Receipt this Period 25.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) .....</p>	<p>255.00</p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p></p>

28020644015

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kevin Brandt</p> <p>Mailing Address</p> <p>City State Zip Code Christiansted VI 00820</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer James River Capital Corporation</p> <p>Occupation President</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <input type="text" value="2000.00"/></p>	<p>Date of Receipt  <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2008"/></p> <p>Transaction ID: A44BA2DB9EC8942CEB0A</p> <p>Amount of Each Receipt this Period  <input type="text" value="2000.00"/></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mrs. Mary J. Byrne</p> <p>Mailing Address 6529 W. Plantation Ln.</p> <p>City State Zip Code Boise ID 83703-2644</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer</p> <p>Occupation Unknown</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <input type="text" value="100.00"/></p>	<p>Date of Receipt  <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2008"/></p> <p>Transaction ID: ACCB1048B8E9949E8A0A</p> <p>Amount of Each Receipt this Period  <input type="text" value="100.00"/></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Climt D. Carlson</p> <p>Mailing Address 3658 Stratford Ave.</p> <p>City State Zip Code Dallas TX 75205-2811</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Carlson Capital</p> <p>Occupation Founder</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <input type="text" value="2000.00"/></p>	<p>Date of Receipt  <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/></p> <p>Transaction ID: A80245FF9EBA644F385C</p> <p>Amount of Each Receipt this Period  <input type="text" value="2000.00"/></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶ <input type="text" value="4100.00"/></p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶ <input type="text" value=""/></p>	

28020644016

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<b>A.</b> Full Name (Last, First, Middle Initial) R. C. Colburn Mailing Address 4093 Fairway Dr City Lewiston State ID Zip Code 83501-9687 FEC ID number of contributing federal political committee. C Name of Employer Occupation Unknown Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 60.00		Date of Receipt MM / DD / YYYY 07 / 01 / 2008 Transaction ID: A08C7EB0A6D5F467F982 Amount of Each Receipt this Period 35.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Rodney Cooley Mailing Address 289 Stagehand Dr City San Jose State CA Zip Code 95111-2840 FEC ID number of contributing federal political committee. C Name of Employer Occupation Unknown Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 30.00		Date of Receipt MM / DD / YYYY 07 / 01 / 2008 Transaction ID: ACD0D0C3D59984F969A9 Amount of Each Receipt this Period 15.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Cotant Mailing Address 606 Scott St City Chubbuck State ID Zip Code 83202-2544 FEC ID number of contributing federal political committee. C Name of Employer City of Chubbuck Occupation Chubbuck Mayor Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 50.00		Date of Receipt MM / DD / YYYY 08 / 01 / 2008 Transaction ID: A9C4405702029427BA9A Amount of Each Receipt this Period 50.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ..... ▶		100.00
TOTAL This Period (last page this line number only) ..... ▶		100.00

28020644017

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:	PAGE 9 / 87		
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) George W. Davidson III</p> <p>Mailing Address 216 Maple Ave.</p> <p>City Barrington State RI Zip Code 02806-3406</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 17 / 2008</p> <p>Transaction ID: A843D305A9B8A40E5A3A</p> <p>Amount of Each Receipt this Period 5.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jerelyn Decker</p> <p>Mailing Address 2748 N. 6000 W.</p> <p>City Rexburg State ID Zip Code 83440-3039</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 25.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 01 / 2008</p> <p>Transaction ID: A2409ACC641DC49C8AC3</p> <p>Amount of Each Receipt this Period 25.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>C.</b> Full Name (Last, First, Middle Initial) William A. Duncan</p> <p>Mailing Address Rr1 Box 253aa</p> <p>City Maconb State OK Zip Code 74852</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Capitol Strategy Consultants, Inc. Occupation President</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 18 / 2008</p> <p>Transaction ID: AC2354D93271E43CEA05</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶</p>		<p>530.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		<p></p>

28020644018

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
DeJores Eastman  
Mailing Address 2155 Charlotte Dr.  
City Idaho Falls State ID Zip Code 83402-5612  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008  
Transaction ID: AC0F7A6C5CD58450483F  
Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)  
Chadwick Eberhard  
Mailing Address 9 W. River Rd.  
City Blackfoot State ID Zip Code 83221-5723  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 50.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008  
Transaction ID: A5DB310F4ED7E42878A1  
Amount of Each Receipt this Period  
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)  
Mr. Richard Fagley  
Mailing Address 270 118th St  
City Orofino State ID Zip Code 83544-9362  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 75.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008  
Transaction ID: A360DC8FAF2BE4B17A44  
Amount of Each Receipt this Period  
25.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... 175.00  
TOTAL This Period (last page this line number only) ..... 175.00

28020644019

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Richard Fagley</p> <p>Mailing Address 270 118th St</p> <p>City Orofino State ID Zip Code 83544-9362</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 100.00</p>	<p>Date of Receipt 08 / 01 / 2008</p> <p>Transaction ID: AA22077C61BF94E1993A</p> <p>Amount of Each Receipt this Period 25.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Dick Finell</p> <p>Mailing Address 402 W. Carmel Valley Rd</p> <p>City Carmel Valley State CA Zip Code 93924-9417</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Unknown</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 10.00</p>	<p>Date of Receipt 09 / 01 / 2008</p> <p>Transaction ID: A954866ACBF594204ACD</p> <p>Amount of Each Receipt this Period 10.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) James F. Gallivan, Jr.</p> <p>Mailing Address PO Box 1320</p> <p>City St Thomas State VI Zip Code 00804-1320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Windward Capital Principal</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2000.00</p>	<p>Date of Receipt 08 / 25 / 2008</p> <p>Transaction ID: A5F6739D84A9B4984A06</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>

SUBTOTAL of Receipts This Page (optional) ..... 1035.00

TOTAL This Period (last page this line number only) .....

28020644020

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Steven H Gordon

Mailing Address

City State Zip Code  
McLean VA 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
100.00

Date of Receipt  
09 / 30 / 2008

Transaction ID: A335944CC13E14C45934

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
William Graham

Mailing Address PO Box 1508

City State Zip Code  
St Thomas VI 00804-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Windward Capital Principal

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
08 / 25 / 2008

Transaction ID: A3CD950862A194FB1961

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Bob Henderson

Mailing Address 4557 Havelcock Grade

City State Zip Code  
Lenore ID 83541-9518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
20.00

Date of Receipt  
09 / 01 / 2008

Transaction ID: AA09A750564C04D58857

Amount of Each Receipt this Period  
20.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1120.00

**TOTAL** This Period (last page this line number only) ..... ▶

28020544021

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 87  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Ronald Hilliard</p> <p>Mailing Address 75 14th St. Unit 4440</p> <p>City Atlanta State GA Zip Code 30309-7619</p> <p>FEC ID number of contributing federal political committee. <input type="checkbox"/> C</p> <p>Name of Employer Benefacio Inc. Occupation President</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt MM / DD / YYYY 09 / 30 / 2008</p> <p>Transaction ID: A3D06597F5A1B4BDB8DC</p> <p>Amount of Each Receipt this Period 200.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) William Hollier</p> <p>Mailing Address 12707 Westbrook Dr</p> <p>City Fairfax State VA Zip Code 22030-8228</p> <p>FEC ID number of contributing federal political committee. <input type="checkbox"/> C</p> <p>Name of Employer Hollier LLC Occupation Partner</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2250.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 07 / 2008</p> <p>Transaction ID: A861AE09FA4C54CE799C</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) John W Holmdahl</p> <p>Mailing Address PO Box 22892</p> <p>City Sacramento State CA Zip Code 95822-0892</p> <p>FEC ID number of contributing federal political committee. <input type="checkbox"/> C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 50.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 13 / 2008</p> <p>Transaction ID: AD99B66A0852149C8A0B</p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶</p>		<p>1250.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		<p></p>

28020544022

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Norma Horton</p> <p>Mailing Address 4340 Pinto Dr</p> <p>City State Zip Code Boise ID 83709-5021</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer retired Occupation Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input type="text" value="10.00"/></p>	<p>Date of Receipt <input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2008"/></p> <p>Transaction ID: ACE3527A26E8D4FE7959</p> <p>Amount of Each Receipt this Period <input type="text" value="10.00"/></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>B.</b> Full Name (Last, First, Middle Initial) Gerald M. Hunter</p> <p>Mailing Address 1736 Seaside Ct</p> <p>City State Zip Code Boise ID 83706-6315</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Idaho Housing and Finance Assoc. Occupation President</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input type="text" value="200.00"/></p>	<p>Date of Receipt <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2008"/></p> <p>Transaction ID: A1F4A591CD0584D68AD9</p> <p>Amount of Each Receipt this Period <input type="text" value="200.00"/></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. W. Clare Hyer</p> <p>Mailing Address 17050 Midland Blvd</p> <p>City State Zip Code Nampa ID 83687-8240</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ <input type="text" value="100.00"/></p>	<p>Date of Receipt <input type="text" value="07"/> / <input type="text" value="01"/> / <input type="text" value="2008"/></p> <p>Transaction ID: A46548288E9F944A1BBE</p> <p>Amount of Each Receipt this Period <input type="text" value="50.00"/></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶</p>		<p><input type="text" value="260.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		<p><input type="text" value=""/></p>

28020644023

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Richard Jacobs</p> <p>Mailing Address 619 S. Washington St. Ste 202</p> <p>City State Zip Code Moscow ID 83843-3063</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer retired Occupation Retired</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <input type="text" value="150.00"/></p>	<p>Date of Receipt  <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2008"/></p> <p>Transaction ID: A72BD9A5B61A4436B980</p> <p>Amount of Each Receipt this Period  <input type="text" value="100.00"/></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Jay Jensen</p> <p>Mailing Address P o Box 252</p> <p>City State Zip Code Emmett ID 83617-0252</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Jensen-Leavitt Insurance Occupation Insurance Agent</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <input type="text" value="25.00"/></p>	<p>Date of Receipt  <input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2008"/></p> <p>Transaction ID: AC19DC894260747FE9D0</p> <p>Amount of Each Receipt this Period  <input type="text" value="25.00"/></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>C.</b> Full Name (Last, First, Middle Initial) William Johnson</p> <p>Mailing Address</p> <p>City State Zip Code Chicago IL 60601</p> <p>FEC ID number of contributing federal political committee. <input type="text" value="C"/></p> <p>Name of Employer Whitman Corporation Occupation Emeritus Chairman</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <input type="text" value="250.00"/></p>	<p>Date of Receipt  <input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/></p> <p>Transaction ID: A76752C87BA674199990</p> <p>Amount of Each Receipt this Period  <input type="text" value="250.00"/></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p>SUBTOTAL of Receipts This Page (optional) ..... ▶</p>		<p><input type="text" value="375.00"/></p>
<p>TOTAL This Period (last page this line number only) ..... ▶</p>		<p><input type="text" value=""/></p>

28020644024

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 87  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Alan M. Kaplan

Mailing Address One Wacker Pl.  
Suite 4150

City Chicago State IL Zip Code 60606

FEC ID number of contributing federal political committee. C

Name of Employer New Century Planners Occupation Insurance Executive

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 28 / 2008  
 Transaction ID: ACCA943B59EAC4F9ABC9  
 Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Camille Knickerbocker

Mailing Address 4078 Sacramento Ave

City Santa Rosa State CA Zip Code 95405-7755

FEC ID number of contributing federal political committee. C

Name of Employer Occupation Unknown

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 20.00

Date of Receipt 07 / 01 / 2008  
 Transaction ID: A0528191292AE4573B04  
 Amount of Each Receipt this Period 10.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Camille Knickerbocker

Mailing Address 4078 Sacramento Ave

City Santa Rosa State CA Zip Code 95405-7755

FEC ID number of contributing federal political committee. C

Name of Employer Occupation Unknown

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 30.00

Date of Receipt 08 / 05 / 2008  
 Transaction ID: A429CE870976E46EEA13  
 Amount of Each Receipt this Period 10.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1020.00

TOTAL This Period (last page this line number only) ..... ▶

28020644025

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Ethel Leatham  
Mailing Address 220 Milton Ave.  
City State Zip Code  
Shelley ID 83274  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
20.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008  
Transaction ID: AFF370A2C394D4158AA0  
Amount of Each Receipt this Period  
20.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Micheal Lyman  
Mailing Address  
6050 78th Ave. SE  
City State Zip Code  
Mercer Island WA 98040-4823  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
The Lyman Group Owner  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
07 / 16 / 2008  
Transaction ID: AB1B5F47E5C9840AC8DE  
Amount of Each Receipt this Period  
200.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ms. Gladys J. MacDonald  
Mailing Address 998 W Alliance St  
City State Zip Code  
Boise ID 83704  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
35.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008  
Transaction ID: A22DF32933C5D4931B88  
Amount of Each Receipt this Period  
20.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 240.00  
**TOTAL** This Period (last page this line number only) ..... ▶

28020644026

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 87

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.**

Full Name (Last, First, Middle Initial)  
Mrs. Freda McLaughlin

Mailing Address 1470 E 8th N

City State Zip Code  
Mountain Home ID 83647-2371

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
70.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008

Transaction ID: AEDAD984B1AEE4B48B21

Amount of Each Receipt this Period  
35.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Quentin Murdock

Mailing Address 1533 West 100 South

City State Zip Code  
Pingree ID 83262-1105

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Unknown

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
35.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008

Transaction ID: AC2B83D6A4A2B4326BCB

Amount of Each Receipt this Period  
35.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Allan Myers

Mailing Address 1176 Oak St.

City State Zip Code  
Pocatello ID 83201-3941

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
100.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008

Transaction ID: A9EE95648081C4C8CBBB

Amount of Each Receipt this Period  
100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 170.00

**TOTAL** This Period (last page this line number only) ..... ▶

28020644027

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 87  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<b>A.</b>	Full Name (Last, First, Middle Initial) Edwin Nestler	Date of Receipt MM / DD / YYYY 07 / 01 / 2008
	Mailing Address PO Box 594	Transaction ID: AA3A5E3779F6A4D42AB9
	City State Zip Code Juliaetta ID 83535-0594	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer retired	Occupation Retired	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	
<b>B.</b>	Full Name (Last, First, Middle Initial) Jack Normanson	Date of Receipt MM / DD / YYYY 07 / 01 / 2008
	Mailing Address 6704 W. Diagonal Rd.	Transaction ID: AED4E47934AC54477A83
	City State Zip Code Rathdrum ID 83858-7176	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 25.00	
<b>C.</b>	Full Name (Last, First, Middle Initial) Dale Olson	Date of Receipt MM / DD / YYYY 08 / 01 / 2008
	Mailing Address 1576 Casseopeia St.	Transaction ID: A47B9D253757844EE9FF
	City State Zip Code Idaho Falls ID 83402-2631	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 25.00	
SUBTOTAL of Receipts This Page (optional) .....		250.00
TOTAL This Period (last page this line number only) .....		

28020644028

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rex Osborne</p> <p>Mailing Address 359 Mango Dr.</p> <p>City Eagle State ID Zip Code 83616-5121</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer URS Corporation Occupation Engineer</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y  07 / 01 / 2008</p> <p>Transaction ID: A120E7EC3ED634A6BB22</p> <p>Amount of Each Receipt this Period  250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>B.</b> Full Name (Last, First, Middle Initial) Lynda Pitts</p> <p>Mailing Address 351 Hicks Valley Rd.</p> <p>City Petaluma State CA Zip Code 94952-9485</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Regan Holding Corp. Occupation CEO</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 900.00</p>	<p>Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y  08 / 25 / 2008</p> <p>Transaction ID: A0A1847F275374A80BD2</p> <p>Amount of Each Receipt this Period  900.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jewel Reynolds</p> <p>Mailing Address 6516 Robertson Dr</p> <p>City Boise State ID Zip Code 83709-2177</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Unknown</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 20.00</p>	<p>Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y  07 / 01 / 2008</p> <p>Transaction ID: AF899B7121BB04891895</p> <p>Amount of Each Receipt this Period  20.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶</p>		<p>1170.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		<p></p>

28020644029

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 87

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)

Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)

Newell Richardson

Mailing Address 2088 E. 49th S.

City

Idaho Falls

State

ID

Zip Code

83404-7689

FEC ID number of contributing federal political committee.

C

Name of Employer  
Madison Hospital

Occupation  
Unknown

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

MM / DD / YYYY  
07 / 01 / 2008

Transaction ID: AB8E497416BB740B6AE0

Amount of Each Receipt this Period

100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Marjorie Rawls Roberts

Mailing Address PO Box 6347

City

St Thomas

State

VI

Zip Code

00804-6347

FEC ID number of contributing federal political committee.

C

Name of Employer  
Marjorie Rawls Roberts, PC

Occupation  
President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY  
08 / 25 / 2008

Transaction ID: A554D667D4CB44D9BB59

Amount of Each Receipt this Period

1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Gregory Romriell

Mailing Address 114 S. 17th Ave

City

Pocatello

State

ID

Zip Code

83201-3301

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self

Occupation  
Dentist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

MM / DD / YYYY  
07 / 01 / 2008

Transaction ID: A9434E93CC321497F89F

Amount of Each Receipt this Period

100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1200.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.**

Full Name (Last, First, Middle Initial) Mrs. Nyal Rydack		Date of Receipt MM / DD / YYYY 07 / 01 / 2008
Mailing Address 3567 Jill		Transaction ID: A4F50428D439F4873AB6
City Ammon	State ID	Zip Code 83401-4606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 50.00	

**B.**

Full Name (Last, First, Middle Initial) Edwin Sandlin		Date of Receipt MM / DD / YYYY 07 / 01 / 2008
Mailing Address 1286 Homer Rd.		Transaction ID: AD2D95B53FE8F4FC192D
City Idaho Falls	State ID	Zip Code 83404-5558
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 15.00	

**C.**

Full Name (Last, First, Middle Initial) Audrey Silverstein		Date of Receipt MM / DD / YYYY 08 / 25 / 2008
Mailing Address PO Box 2		Transaction ID: A0D43D9D215AC4F7B9E1
City Merion Station	State PA	Zip Code 19066-0002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	1065.00
TOTAL This Period (last page this line number only) .....	

28020644031

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 87  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Mr. Stanley Simpson  
Mailing Address 38 W Main St Apt 3  
City Saint Anthony State ID 83445-2133  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 50.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008  
Transaction ID: A7269BD90F1D34F21965  
Amount of Each Receipt this Period  
25.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Donald Smith  
Mailing Address 2515 Rivers Edge Dr.  
City Saint Anthony State ID 83445-5533  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 35.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2008  
Transaction ID: AC4AEBCF8214040B680D  
Amount of Each Receipt this Period  
35.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Stephen Smith  
Mailing Address Box C  
City Sandpoint State ID 83864-0117  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Cooke & Lamanna Attorney  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 25.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2008  
Transaction ID: AEADA84AD440F414EA8E  
Amount of Each Receipt this Period  
25.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 85.00  
TOTAL This Period (last page this line number only) ..... ▶

28020644032

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 87

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)

Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Roger Spiker</p> <p>Mailing Address PO Box 74</p> <p>City State Zip Code Ola ID 83657-0074</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer retired Occupation Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 01 / 2008</p> <p>Transaction ID: AE888EA92CA404571B74</p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Len Stears</p> <p>Mailing Address 547 E. 1500 N.</p> <p>City State Zip Code Shelley ID 83274-5032</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 100.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 01 / 2008</p> <p>Transaction ID: A8748925EEA4B4582A51</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Chris Story</p> <p>Mailing Address 491 Overlake Dr</p> <p>City State Zip Code Cocolalla ID 83813</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Unknown</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 01 / 2008</p> <p>Transaction ID: AE86A214122E84938A24</p> <p>Amount of Each Receipt this Period 5.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p>155.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p></p>

28020644033

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Ron Streeter  
Mailing Address 5185 N. 4th St.  
City Dalton Gardens State ID Zip Code 83815-7327  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 100.00  
Date of Receipt 08 / 01 / 2008  
Transaction ID: AFEE54DD4401C49BBBB7  
Amount of Each Receipt this Period 100.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Charles Taggart  
Mailing Address PO Box 7611  
City Philadelphia State PA Zip Code 19101-7611  
FEC ID number of contributing federal political committee. C  
Name of Employer retired Occupation Retired  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 10.00  
Date of Receipt 07 / 01 / 2008  
Transaction ID: AEF24C59160CD43C9BF8  
Amount of Each Receipt this Period 10.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Warren C Wagner  
Mailing Address PO Box 656  
City Mullan State ID Zip Code 83846-0656  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 20.00  
Date of Receipt 07 / 01 / 2008  
Transaction ID: A879445A2BF864FAB864  
Amount of Each Receipt this Period 20.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 130.00  
TOTAL This Period (last page this line number only)

28020644034

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 87

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. W. Jeffrey Walters</p> <p>Mailing Address 1250 S. 2nd E</p> <p>City Rexburg State ID Zip Code 83440-3862</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Walters Produce Occupation Agri Business</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 200.00</p>	<p>Date of Receipt 07 / 01 / 2008</p> <p>Transaction ID: A75D26763582E4B9F8AC</p> <p>Amount of Each Receipt this Period 200.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mable Wardlaw</p> <p>Mailing Address 731 Meadowview Dr</p> <p>City Nampa State ID Zip Code 83651-2168</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer retired Occupation Retired</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 50.00</p>	<p>Date of Receipt 07 / 01 / 2008</p> <p>Transaction ID: A237CA5C1AF8045B2BA7</p> <p>Amount of Each Receipt this Period 25.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Elwood Werry</p> <p>Mailing Address 207 Winterton Rd.</p> <p>City Sandpoint State ID Zip Code 83864-4985</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 30.00</p>	<p>Date of Receipt 07 / 16 / 2008</p> <p>Transaction ID: AD06CE5C05D44452EB4C</p> <p>Amount of Each Receipt this Period 30.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p>255.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p></p>

28020644035

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 87

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)

Robert Wood

Mailing Address 813 Vicar Ln

City

Alexandria

State

VA

Zip Code

22302-3420

FEC ID number of contributing federal political committee.

C

Name of Employer  
Barbour Griffin and Rogers  
LLC

Occupation  
President

Receipt For: 2010

Primary  General

Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY  
08 / 07 / 2008

Transaction ID: A405F0277796B496797E

Amount of Each Receipt this Period

200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Robert Wood

Mailing Address 813 Vicar Ln

City

Alexandria

State

VA

Zip Code

22302-3420

FEC ID number of contributing federal political committee.

C

Name of Employer  
Barbour Griffin and Rogers  
LLC

Occupation  
President

Receipt For: 2010

Primary  General

Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY  
08 / 07 / 2008

Transaction ID: A3F5FBEC74C8745FD96D

Amount of Each Receipt this Period

800.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1000.00

TOTAL This Period (last page this line number only) ▶

17455.00

28020644036

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
AAJ PAC  
Mailing Address 1050 31st St. NW  
City Washington State DC Zip Code 20007-4405  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2008  
Transaction ID: A8513403F4C454920A8D  
Amount of Each Receipt this Period  
1500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Blank Rome LLP PAC  
Mailing Address 600 New Hampshire Ave.  
City Washington State DC Zip Code 20037-2403  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2008  
Transaction ID: A4CB7758612AE47F8911  
Amount of Each Receipt this Period  
1000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Deloitte Federal PAC  
Mailing Address PO Box 365  
City Washington State DC Zip Code 20044  
FEC ID number of contributing federal political committee. C  
Name of Employer Occupation  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2008  
Transaction ID: AC85B7CC1962E47BDB36  
Amount of Each Receipt this Period  
3000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 5500.00

TOTAL This Period (last page this line number only) ..... ▶

28020644037

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Esop PAC

Mailing Address 1726 M St. NW Suite 501

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 07 / 17 / 2008

Transaction ID: AF067B53A603C4713869

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Fed PAC

Mailing Address 801 Pennsylvania Ave. NW

City Washington State DC Zip Code 20004-2604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt 08 / 07 / 2008

Transaction ID: A96AD11979CA14CC7AF0

Amount of Each Receipt this Period 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Friends of Gordon Smith

Mailing Address 4949 Meadows Rd. Ste 625

City Lake Oswego State OR Zip Code 97035-3605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 541.45

Date of Receipt 08 / 05 / 2008

Transaction ID: AF2D22E0D29274FEEBEF

Amount of Each Receipt this Period 541.45

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 2541.45

TOTAL This Period (last page this line number only) ..... ▶

28020644038

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 87  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Genworth Financial Inc. PAC Mailing Address 6620 West Broad St. City Richmond State VA Zip Code 23230-1716 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2008 Transaction ID: A6101F16E3EBA4C0DA1C Amount of Each Receipt this Period 2500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Medtronic Medical Tech Fund PAC Mailing Address 1420 New York Ave, NW City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt MM / DD / YYYY 07 / 18 / 2008 Transaction ID: AFC3847430122407B903 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Midwives PAC Mailing Address 8403 Colesville Rd. Suite 1550 City Silver Spring State MD Zip Code 20910-6374 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 07 / 18 / 2008 Transaction ID: A1102EB25751040B79EC Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ..... ▶		5500.00
TOTAL This Period (last page this line number only) ..... ▶		5500.00

28020644039

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 87  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) National Venture Capital Assn. PAC</p> <p>Mailing Address 1655 N. Fort Myer Dr. Suite 850</p> <p>City State Zip Code Arlington VA 22209-3199</p> <p>FEC ID number of contributing federal political committee. <input type="checkbox"/> C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2500.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 07 / 2008</p> <p>Transaction ID: AA954172F6E8F416C803</p> <p>Amount of Each Receipt this Period 2500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Pacific Pulmonary Services PAC</p> <p>Mailing Address 88 Rowland Way Suite 300</p> <p>City State Zip Code Novato CA 94947</p> <p>FEC ID number of contributing federal political committee. <input type="checkbox"/> C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 3000.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 07 / 2008</p> <p>Transaction ID: A54DB528BAB7145A8A2C</p> <p>Amount of Each Receipt this Period 2000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Physical Therapy PAC</p> <p>Mailing Address 1111 N Fairfax St</p> <p>City State Zip Code Alexandria VA 22314</p> <p>FEC ID number of contributing federal political committee. <input type="checkbox"/> C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2000.00</p>	<p>Date of Receipt MM / DD / YYYY 08 / 06 / 2008</p> <p>Transaction ID: A9EA3559FB21345F092B</p> <p>Amount of Each Receipt this Period 2000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		<p>6500.00</p>

2802064040

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Syngenta Corporation PAC

Mailing Address 2 Righter Parkway  
PO Box 15458

City State Zip Code  
Wilmington DE 19850-5458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
08 / 07 / 2008

Transaction ID: A116AD573675F4F93BC1

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Tesoro Petroleum Corp PAC

Mailing Address 300 Concord Plaza Dr

City State Zip Code  
San Antonio TX 78216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2008

Transaction ID: ABCAB2F607F9346E1966

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
US Oncology Inc. Good Government Committee

Mailing Address 16825 Northcastle Dr. Suite 1300

City State Zip Code  
Houston TX 77060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2008

Transaction ID: A1067A049131F407EB32

Amount of Each Receipt this Period  
650.00

In-kind:  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3650.00

TOTAL This Period (last page this line number only) ..... ▶

28020644041

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) US Oncology Inc. Good Government Committee</p> <p>Mailing Address 16825 Northcastle Dr. Suite 1300</p> <p>City State Zip Code Houston TX 77060</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5000.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 18 / 2008</p> <p>Transaction ID: AF24453C86BDA4324AAD</p> <p>Amount of Each Receipt this Period 4350.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Washington Divisino of URS Corporation PAC</p> <p>Mailing Address 2345 Crystal Dr. Ste 708</p> <p>City State Zip Code Arlington VA 22202-4801</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 8500.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 18 / 2008</p> <p>Transaction ID: AC816C064FC714B80AC4</p> <p>Amount of Each Receipt this Period 3500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Washington Divisino of URS Corporation PAC</p> <p>Mailing Address 2345 Crystal Dr. Ste 708</p> <p>City State Zip Code Arlington VA 22202-4801</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 8500.00</p>	<p>Date of Receipt MM / DD / YYYY 07 / 18 / 2008</p> <p>Transaction ID: A57F85A2BE0C6488CB67</p> <p>Amount of Each Receipt this Period 1500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>

SUBTOTAL of Receipts This Page (optional) .....	9350.00
TOTAL This Period (last page this line number only) .....	33041.45

28020644042

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bryant Ideas - Meridian</p> <p>Mailing Address 1500 N. Locust Grove Ste. 100</p> <p>City State Zip Code Meridian ID 83642</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 151.42</p>		<p>Date of Receipt MM / DD / YYYY 08 / 20 / 2008</p> <p>Transaction ID: AE752506D35EF49D2A86</p> <p>Amount of Each Receipt this Period 151.41</p> <p>Refund <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bryant Ideas - Meridian</p> <p>Mailing Address 1500 N. Locust Grove Ste. 100</p> <p>City State Zip Code Meridian ID 83642</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 151.42</p>		<p>Date of Receipt MM / DD / YYYY 08 / 20 / 2008</p> <p>Transaction ID: AB9FC035EF49E4A17B28</p> <p>Amount of Each Receipt this Period 0.01</p> <p>Refund <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Delta Airlines - Atlanta</p> <p>Mailing Address 1600 Aviation Blvd.</p> <p>City State Zip Code Atlanta GA 30320</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 6520.77</p>		<p>Date of Receipt MM / DD / YYYY 09 / 10 / 2008</p> <p>Transaction ID: AE18DE040AC0C4CBCAB7</p> <p>Amount of Each Receipt this Period 2054.00</p> <p>Refund <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>		<p>2205.42</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>		<p></p>

28020644043

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 87

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)

Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)

Federal Express Corp.

Mailing Address P. O. Box 94515

City

State

Zip Code

Palatine

IL

60094-4515

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010

Primary  General

Other (specify) ▼

Election Cycle-to-Date ▼

269.48

Date of Receipt

MM / DD / YYYY  
09 / 30 / 2008

Transaction ID: A5029FFC51B1B487CB1A

Amount of Each Receipt this Period

147.58

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Lowes

Mailing Address 3400 N. Eage Rd.

City

State

Zip Code

Meridian

ID

83642

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010

Primary  General

Other (specify) ▼

Election Cycle-to-Date ▼

44.27

Date of Receipt

MM / DD / YYYY  
09 / 08 / 2008

Transaction ID: ABD4E31A4542247A8B81

Amount of Each Receipt this Period

44.27

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

191.85

TOTAL This Period (last page this line number only) .....

2397.27

28020644044

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 87

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)

Merrill Lynch - Idaho Falls

Mailing Address 560 S. Woodruff Ave.

City State Zip Code  
Idaho Falls ID 83403

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10312.30

Date of Receipt

MM / DD / YYYY  
07 / 01 / 2008

Transaction ID: AFB21E7149D994DE6A6E

Amount of Each Receipt this Period

371.74

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Merrill Lynch - Idaho Falls

Mailing Address 560 S. Woodruff Ave.

City State Zip Code  
Idaho Falls ID 83403

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10680.55

Date of Receipt

MM / DD / YYYY  
07 / 31 / 2008

Transaction ID: ACAF66382C2CB4C9A9FF

Amount of Each Receipt this Period

368.25

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Wells Fargo Brokerage Account - Salt Lake City

Mailing Address 299 South Main, 5th Floor

City State Zip Code  
Salt Lake City UT 84111

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
26233.53

Date of Receipt

MM / DD / YYYY  
08 / 20 / 2008

Transaction ID: A763E02A575AC4297ABB

Amount of Each Receipt this Period

1670.41

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2410.40

TOTAL This Period (last page this line number only) ▶

28020644045

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Wells Fargo Brokerage Account - Salt Lake City  
Mailing Address 299 South Main, 5th Floor

City Salt Lake City State UT Zip Code 84111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 26951.53

Date of Receipt 09 / 15 / 2008  
 Transaction ID: A59E72D4727AF430796C  
 Amount of Each Receipt this Period 718.00

Interest Income  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Zions Bank Money Market - Boise  
Mailing Address 890 Main St.

City Boise State ID Zip Code 83702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 28560.30

Date of Receipt 08 / 11 / 2008  
 Transaction ID: A32531B2D92604929845  
 Amount of Each Receipt this Period 280.10

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Zions Bank Money Market - Boise  
Mailing Address 890 Main St.

City Boise State ID Zip Code 83702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 28059.67

Date of Receipt 07 / 12 / 2008  
 Transaction ID: AC315711E2B33470EB9F  
 Amount of Each Receipt this Period 167.55

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ 1165.65

TOTAL This Period (last page this line number only) ..... ▶

28020644046

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Zions Bank Money Market - Boise Mailing Address 890 Main St. City State Zip Code Boise ID 83702 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 28210.76		Date of Receipt MM / DD / YYYY 08 / 05 / 2008 Transaction ID: ACF129BAF62DC45BB929 Amount of Each Receipt this Period 151.09 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Zions Bank Money Market - Boise Mailing Address 890 Main St. City State Zip Code Boise ID 83702 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 28560.30		Date of Receipt MM / DD / YYYY 08 / 11 / 2008 Transaction ID: A3462BF1B21684942A11 Amount of Each Receipt this Period 69.44 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Zions Bank Money Market - Boise Mailing Address 890 Main St. City State Zip Code Boise ID 83702 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 27892.12		Date of Receipt MM / DD / YYYY 07 / 09 / 2008 Transaction ID: A90AB3D6A5FE94CED8C5 Amount of Each Receipt this Period 702.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ..... ▶		922.53
TOTAL This Period (last page this line number only) ..... ▶		922.53

28020644047

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Zions Bank Money Market - Boise</p> <p>Mailing Address 890 Main St.</p> <p>City State Zip Code Boise ID 83702</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 27892.12</p>	<p>Date of Receipt MM / DD / YYYY 07 / 09 / 2008</p> <p>Transaction ID: A8843B31B64E448AD877</p> <p>Amount of Each Receipt this Period 271.07</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Zions Checking Acct - Boise</p> <p>Mailing Address 890 Main St.</p> <p>City State Zip Code Boise ID 83702</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5870.99</p>	<p>Date of Receipt MM / DD / YYYY 09 / 30 / 2008</p> <p>Transaction ID: A109695D4B16044DDAA5</p> <p>Amount of Each Receipt this Period 0.01</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Zions Checking Acct - Boise</p> <p>Mailing Address 890 Main St.</p> <p>City State Zip Code Boise ID 83702</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5609.21</p>	<p>Date of Receipt MM / DD / YYYY 07 / 31 / 2008</p> <p>Transaction ID: AE56825DD02DE4915BFE</p> <p>Amount of Each Receipt this Period 206.03</p> <p>Interest Income</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p>477.11</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p></p>

28020644048

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Zions Checking Acct - Boise Mailing Address 890 Main St. City State Zip Code Boise ID 83702 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5870.99		Date of Receipt MM / DD / YYYY 09 / 30 / 2008 Transaction ID: AE872CAAC42D24EFDBBF Amount of Each Receipt this Period 120.32 Interest Income <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Zions Checking Acct - Boise Mailing Address 890 Main St. City State Zip Code Boise ID 83702 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5750.66		Date of Receipt MM / DD / YYYY 08 / 31 / 2008 Transaction ID: A226481D57C7A4BDEBC6 Amount of Each Receipt this Period 141.44 Interest Income <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Zions Checking Acct - Boise Mailing Address 890 Main St. City State Zip Code Boise ID 83702 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5609.21		Date of Receipt MM / DD / YYYY 07 / 31 / 2008 Transaction ID: AF3CB8608CD11424AB4B Amount of Each Receipt this Period 0.01 Interest Income <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		261.77
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

28020644049

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 87  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
Zions Checking Acct - Boise  
Mailing Address 890 Main St.

City State Zip Code  
Boise ID 83702

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5750.66

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 08 / 31 / 2008

Transaction ID: A455A04ED0D4A4CE0858

Amount of Each Receipt this Period  
0.01

Interest Income  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

28020644050

SUBTOTAL of Receipts This Page (optional) .....	▶	0.01
TOTAL This Period (last page this line number only) .....	▶	5237.47

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
American Express

Transaction ID: BD169514064B24AD0A8B  
Date of Disbursement

Mailing Address Box 0001

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	4		2	0	0	8		

City State Zip Code  
Los Angeles CA 90096-8000

Amount of Each Disbursement this Period

Purpose of Disbursement

370.99
--------

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
American Express

Transaction ID: B85E45E3FF5BF4EAF876  
Date of Disbursement

Mailing Address Box 0001

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	8		2	0	0	8		

City State Zip Code  
Los Angeles CA 90096-8000

Amount of Each Disbursement this Period

Purpose of Disbursement  
Meals, Computer equipment

1400.38
---------

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
American Express Co. - Dallas

Transaction ID: B6968DC8952764254A43  
Date of Disbursement

Mailing Address P.O. Box 630001

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		3	1		2	0	0	8		

City State Zip Code  
Dallas TX 75363-0001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Meals

19.46
-------

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1790.83
---------

TOTAL This Period (last page this line number only) ▶

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28020644051

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
American Express Co. - Dallas

Mailing Address P.O. Box 630001

City Dallas State TX Zip Code 75363-0001

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: B674B9E8320634A29962  
Date of Disbursement

08 / 08 / 2008

Amount of Each Disbursement this Period

0.16

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
AMPCO - Boise

Mailing Address PO Box 2237

City Boise State ID Zip Code 83701-2237

Purpose of Disbursement  
Parking

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: BB0CF47B33E9C406AB5D  
Date of Disbursement

09 / 22 / 2008

Amount of Each Disbursement this Period

39.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
Aristotle International

Mailing Address 205 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003-1182

Purpose of Disbursement  
Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: B4A42D94CAA74D63AB4  
Date of Disbursement

07 / 31 / 2008

Amount of Each Disbursement this Period

1200.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1239.16

TOTAL This Period (last page this line number only) ▶

28020644052

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Armand's Chicago Pizza - Arvada</p> <p>Mailing Address 226 Mass. Ave</p> <p>City Washington State DC Zip Code 20002-4941</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B767306C4E8B14F9EA5B</p> <p>Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 24.88</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT&amp;T - Phoenix</p> <p>Mailing Address PO Box 30459</p> <p>City Los Angeles State CA Zip Code 90030-0459</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B2FA1DEFE0F40408DBE1</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 76.17</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) AT&amp;T - Phoenix</p> <p>Mailing Address PO Box 30459</p> <p>City Los Angeles State CA Zip Code 90030-0459</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B87C00750DB674A38935</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 103.79</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

204.84

TOTAL This Period (last page this line number only) ▶

28020644053

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Avis - Boise</p> <p>Mailing Address 3201 Airport Way</p> <p>City Boise State ID Zip Code 83705</p> <p>Purpose of Disbursement Car Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BB0BCD50C3A294207B7F Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 224.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bank of America - Phoenix</p> <p>Mailing Address PO Box 53139</p> <p>City Phoenix State AZ Zip Code 85072-3139</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5241225FA7AC441EAC5 Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 2680.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Boingo Wireless</p> <p>Mailing Address 200 W. Madison Suite 2830</p> <p>City Chicago State IL Zip Code 60606-3524</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2C2A29636E5747E0863 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 4.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2909.54
<b>TOTAL</b> This Period (last page this line number only) .....	

28020644054

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.**

Full Name (Last, First, Middle Initial)  
Boingo Wireless

Transaction ID: B663135B920774B5E86B  
Date of Disbursement  
09 / 22 / 2008

Mailing Address 200 W. Madison  
Suite 2830

City Chicago State IL Zip Code 60606-3524

Purpose of Disbursement  
Internet

Amount of Each Disbursement this Period  
7.95

Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
Bryant Ideas - Meridian

Transaction ID: B62A6D5CCED6048A9913  
Date of Disbursement  
08 / 20 / 2008

Mailing Address 1500 N. Locust Grove Ste. 100

City Meridian State ID Zip Code 83642

Purpose of Disbursement  
Event Supplies

Amount of Each Disbursement this Period  
151.42

Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)  
Centra Bank

Transaction ID: B218258F0B62242548DB  
Date of Disbursement  
07 / 02 / 2008

Mailing Address 1101 Frederick St.

City Hagerstown State MD Zip Code 21740-6828

Purpose of Disbursement  
Credit Card Processing Fee

Amount of Each Disbursement this Period  
19.95

Candidate Name \_\_\_\_\_ Category/Type \_\_\_\_\_

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: \_\_\_\_\_ District: \_\_\_\_\_

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 179.32

**TOTAL** This Period (last page this line number only) ..... ▶

28020644055

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17    18    19a    19b  
 20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Centra Bank</p> <p>Mailing Address 1101 Frederick St.</p> <p>City Hagerstown State MD Zip Code 21740-6828</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B756988A993CD4706A93 Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 61.84</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Centra Bank</p> <p>Mailing Address 1101 Frederick St.</p> <p>City Hagerstown State MD Zip Code 21740-6828</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B6F3A3CF690994AD7812 Date of Disbursement 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 56.53</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Cheers</p> <p>Mailing Address 828 W. Idaho St.</p> <p>City Boise State ID Zip Code 83702-5824</p> <p>Purpose of Disbursement Stationary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BB3164CEE56E24A6EA1A Date of Disbursement 08 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 381.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional) .....</p>	<p>499.97</p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p></p>

28020644056

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Clearwire Broadband</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF5702C116DFF410E894</p> <p>Date of Disbursement MM / DD / YYYY 07 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 42.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Clearwire Broadband</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B722A80BF1EE54597A2E</p> <p>Date of Disbursement MM / DD / YYYY 08 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 43.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Clearwire Broadband</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5399FFD4C41148CB931</p> <p>Date of Disbursement MM / DD / YYYY 09 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 43.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) .....

129.54

TOTAL This Period (last page this line number only) .....

28020644057

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Comcast Cable</p> <p>Mailing Address PO Box 3005</p> <p>City Southeastern State PA Zip Code 19398-3005</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B1A8AE7F163CA44489D4</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 120.42</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Comcast Cable</p> <p>Mailing Address PO Box 3005</p> <p>City Southeastern State PA Zip Code 19398-3005</p> <p>Purpose of Disbursement Internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BCE3C78A5878C45A39D7</p> <p>Date of Disbursement 08 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 127.15</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) CPA Partners &amp; Consultants PLLC - Boise</p> <p>Mailing Address 960 Broadway Avenue PO Box 16328</p> <p>City Boise State ID Zip Code 83715</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B7040E5D434FA43B8977</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 200.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **447.57**

**TOTAL** This Period (last page this line number only) ..... ▶

2802064058

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
Delta Airlines - Atlanta

Transaction ID: BCD88DD951D614CA29A1  
Date of Disbursement

Mailing Address 1600 Aviation Blvd.

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	8

City Atlanta State GA Zip Code 30320

Amount of Each Disbursement this Period

Purpose of Disbursement  
Airfare

3156.00

Candidate Name

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Delta Airlines - Atlanta

Transaction ID: BF150CBC2684044DFBDD  
Date of Disbursement

Mailing Address 1600 Aviation Blvd.

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	8		2	0	0	8

City Atlanta State GA Zip Code 30320

Amount of Each Disbursement this Period

Purpose of Disbursement  
Airfare

1052.00

Candidate Name

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Delta Airlines - Atlanta

Transaction ID: B17B6A017AD5844B184A  
Date of Disbursement

Mailing Address 1600 Aviation Blvd.

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	8

City Atlanta State GA Zip Code 30320

Amount of Each Disbursement this Period

Purpose of Disbursement  
Airfare

339.50

Candidate Name

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

4547.50

TOTAL This Period (last page this line number only) ▶

2802064059

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17    18    19a    19b  
 20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Delta Airlines - Atlanta</p> <p>Mailing Address 1600 Aviation Blvd.</p> <p>City Atlanta State GA Zip Code 30320</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼          State: District:</p>	<p>Transaction ID: BA172585497F14BBB9E4 Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Direct Mail Processors</p> <p>Mailing Address 1150 Conrad Ct.</p> <p>City Hagerstown State MD Zip Code 21740-5905</p> <p>Purpose of Disbursement Direct Mail Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼          State: District:</p>	<p>Transaction ID: B5CA2534628C54DCC9E8 Date of Disbursement 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 595.54</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Direct Mail Processors</p> <p>Mailing Address 1150 Conrad Ct.</p> <p>City Hagerstown State MD Zip Code 21740-5905</p> <p>Purpose of Disbursement Mail Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼          State: District:</p>	<p>Transaction ID: B507117748E0D471DA4A Date of Disbursement 08 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 258.31</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>878.85</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

28020644060

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (in Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Direct Mail Processors</p> <p>Mailing Address 1150 Conrad Ct.</p> <p>City Hagerstown State MD Zip Code 21740-5905</p> <p>Purpose of Disbursement Mail Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BE52438B2ECC745B3BA5</p> <p>Date of Disbursement 08 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Downtown Public Parking - Boise</p> <p>Mailing Address 805 W. Idaho STE 401</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B1042CEF500974A849CC</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Downtown Public Parking - Boise</p> <p>Mailing Address 805 W. Idaho STE 401</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B76E31E1F948B4996B4A</p> <p>Date of Disbursement 08 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional) .....</p>	<p>500.00</p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p></p>

28020644061

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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17    18    19a    19b  
 20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.** Full Name (Last, First, Middle Initial)  
Efax Plus Service

Transaction ID: B5D11A39F24314403942  
Date of Disbursement: 07 / 30 / 2008

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period: 16.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
Efax Plus Service

Transaction ID: BEFBAAF215FB4647B2E  
Date of Disbursement: 09 / 02 / 2008

Mailing Address

City State Zip Code

Purpose of Disbursement

Telephone

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period: 16.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
Efax Plus Service

Transaction ID: BED5F0734718742C1B63  
Date of Disbursement: 09 / 30 / 2008

Mailing Address

City State Zip Code

Purpose of Disbursement

Telephone

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Amount of Each Disbursement this Period: 16.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 50.85

TOTAL This Period (last page this line number only) ..... ▶

28020644062

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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17 20a     18 20b     19a 20c     19b 21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) ESP Printing - Boise</p>	<p>Transaction ID: B357B1DE01FBE439AB0E Date of Disbursement</p>
<p>Mailing Address 317 E. 17th Street</p>	<p><input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y 07 / 03 / 2008</p>
<p>City Boise State ID Zip Code 83714</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Postage</p>	<p>124.72</p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	
<p><b>B.</b> Full Name (Last, First, Middle Initial) ESP Printing - Boise</p>	<p>Transaction ID: B40AD14E895F44906B9B Date of Disbursement</p>
<p>Mailing Address 317 E. 17th Street</p>	<p><input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y 07 / 16 / 2008</p>
<p>City Boise State ID Zip Code 83714</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Direct Mail</p>	<p>737.11</p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fales &amp; Co. - Boise</p>	<p>Transaction ID: B258CF2BA964D434E8AE Date of Disbursement</p>
<p>Mailing Address PO Box 9026</p>	<p><input type="checkbox"/> M / <input type="checkbox"/> D / <input type="checkbox"/> Y 07 / 16 / 2008</p>
<p>City Boise State ID Zip Code 83707</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll Fees</p>	<p>100.00</p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	

SUBTOTAL of Disbursements This Page (optional) .....

961.83

TOTAL This Period (last page this line number only) .....

28020644063

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Federal Express Corp.</p>		<p>Transaction ID: B5FA02DD1507E4663840 Date of Disbursement 07 / 02 / 2008</p>
<p>Mailing Address P. O. Box 94515</p>		<p>Amount of Each Disbursement this Period 63.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>City Palatine State IL Zip Code 60094-4515</p>	<p>Purpose of Disbursement Shipping Candidate Name Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p><b>B.</b> Full Name (Last, First, Middle Initial) Federal Express Corp.</p>		<p>Transaction ID: B13170AC406DD4F73852 Date of Disbursement 07 / 16 / 2008</p>
<p>Mailing Address P. O. Box 94515</p>		<p>Amount of Each Disbursement this Period 95.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>City Palatine State IL Zip Code 60094-4515</p>	<p>Purpose of Disbursement Shipping Candidate Name Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p><b>C.</b> Full Name (Last, First, Middle Initial) Federal Express Corp.</p>		<p>Transaction ID: B9FBEB23F35D34AA3AC4 Date of Disbursement 07 / 17 / 2008</p>
<p>Mailing Address P. O. Box 94515</p>		<p>Amount of Each Disbursement this Period 9.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>City Palatine State IL Zip Code 60094-4515</p>	<p>Purpose of Disbursement Shipping Candidate Name Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>168.75</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

28020644064

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Federal Express Corp.  Mailing Address P. O. Box 94515  City Palatine State IL Zip Code 60094-4515 Purpose of Disbursement Shipping Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: B2824482EB97646EEBF4 Date of Disbursement 07 / 31 / 2008  Amount of Each Disbursement this Period 235.47 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Federal Express Corp.  Mailing Address P. O. Box 94515  City Palatine State IL Zip Code 60094-4515 Purpose of Disbursement Shipping Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: BA0AB9947F0874D3C89B Date of Disbursement 08 / 14 / 2008  Amount of Each Disbursement this Period 147.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Federal Express Corp.  Mailing Address P. O. Box 94515  City Palatine State IL Zip Code 60094-4515 Purpose of Disbursement Shipping Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		Transaction ID: B963DD7ABCDF4AF0A9E Date of Disbursement 08 / 28 / 2008  Amount of Each Disbursement this Period 31.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....	414.68
TOTAL This Period (last page this line number only) .....	

28020644065

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Federal Express Corp.</p> <p>Mailing Address P. O. Box 94515</p> <p>City Palatine State IL Zip Code 60094-4515</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: BD6B0D193FC02430D9B4</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 147.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Federal Express Corp.</p> <p>Mailing Address P. O. Box 94515</p> <p>City Palatine State IL Zip Code 60094-4515</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: BB40DC088DEA7496FA44</p> <p>Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 94.29</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) FedEx Kinkos</p> <p>Mailing Address 3110 E. Florence</p> <p>City Meridian State ID Zip Code 83642-1586</p> <p>Purpose of Disbursement Copies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: BD0BE179E2F4E44DA916</p> <p>Date of Disbursement 07 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 5.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

247.81

TOTAL This Period (last page this line number only) ▶

28020644066

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Fred Meyer - Boise</p> <p>Mailing Address 3527 S Federal Way</p> <p>City Boise State ID WA Zip Code 83716</p> <p>Purpose of Disbursement Event Supplies <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B2D2641776E9C41D8967</p> <p>Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 9.63</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) G. Loomis</p> <p>Mailing Address 1359 Down River Dr.</p> <p>City Woodland State WA Zip Code 98674-9546</p> <p>Purpose of Disbursement Gifts <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B0B177FE78E874468A37</p> <p>Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 297.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) G. Loomis</p> <p>Mailing Address 1359 Down River Dr.</p> <p>City Woodland State WA Zip Code 98674-9546</p> <p>Purpose of Disbursement Shipping <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BEE4822BA73C24AF6AFE</p> <p>Date of Disbursement 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 10.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>	
<p>318.11</p>	
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>	

28020644067

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
Godfather's Pizza

Transaction ID: B61E7E72557404B39A04  
Date of Disbursement

Mailing Address

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	0	8

City State Zip Code  
Minneapolis MN

Amount of Each Disbursement this Period

Purpose of Disbursement  
Meals

9.17
------

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Hancock Fabrics

Transaction ID: B2CDA659A1CF14C99B9A  
Date of Disbursement

Mailing Address 2249 E. 17th St.

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	8

City State Zip Code  
Idaho Falls ID 83404-6512

Amount of Each Disbursement this Period

Purpose of Disbursement  
Event Supplies

108.08
--------

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Harland Checks

Transaction ID: B19369B0098504D8DBE0  
Date of Disbursement

Mailing Address

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	0	8

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement  
Checks

43.25
-------

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

160.50
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TOTAL This Period (last page this line number only) ▶

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28020644068

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Idaho State Liquor Store - Boise		Transaction ID: BDD7B8B02308940668FA Date of Disbursement 09 / 15 / 2008	
Mailing Address 10464 Overland		Amount of Each Disbursement this Period 42.29	
City Boise      State ID      Zip Code 83709-1433	Purpose of Disbursement Event Expense		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:      District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
<b>B.</b> Full Name (Last, First, Middle Initial) Idaho State Tax Commission - Boise		Transaction ID: B2F49C25B4C584865B23 Date of Disbursement 07 / 01 / 2008	
Mailing Address P. O. Box 58		Amount of Each Disbursement this Period 101.01	
City Boise      State ID      Zip Code 83707-0076	Purpose of Disbursement Unemployment tax		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:      District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
<b>C.</b> Full Name (Last, First, Middle Initial) Idaho State Tax Commission - Boise		Transaction ID: BE6147D8342374AE6866 Date of Disbursement 07 / 02 / 2008	
Mailing Address P. O. Box 58		Amount of Each Disbursement this Period 195.00	
City Boise      State ID      Zip Code 83707-0076	Purpose of Disbursement Payroll Taxes		
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:      District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		338.30	
<b>TOTAL</b> This Period (last page this line number only) .....		.....	

2802064069

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<b>A.</b> Full Name (Last, First, Middle Initial) Idaho State Tax Commission - Boise		Transaction ID: BFC8F771252DF4740AF3 Date of Disbursement 08 / 01 / 2008
Mailing Address P. O. Box 58		Amount of Each Disbursement this Period 188.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Boise      State ID      Zip Code 83707-0076		
Purpose of Disbursement Payroll taxes	Category/Type	Amount of Each Disbursement this Period 293.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:	Full Name (Last, First, Middle Initial) Idaho State Tax Commission - Boise	Transaction ID: B335FE6EE0EEF4601997 Date of Disbursement 08 / 29 / 2008
<b>B.</b> Mailing Address P. O. Box 58		Amount of Each Disbursement this Period 23.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Boise      State ID      Zip Code 83707-0076		
Purpose of Disbursement Payroll Taxes	Category/Type	Amount of Each Disbursement this Period 209.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:	Full Name (Last, First, Middle Initial) Idaho State Tax Commission - Boise	Transaction ID: B6B58C61D1619467BAC1 Date of Disbursement 09 / 29 / 2008
<b>C.</b> Mailing Address P. O. Box 58		Amount of Each Disbursement this Period 23.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Boise      State ID      Zip Code 83707-0076		
Purpose of Disbursement Unemployment Insurance	Category/Type	Amount of Each Disbursement this Period 209.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

SUBTOTAL of Disbursements This Page (optional) ..... ▶

504.07

TOTAL This Period (last page this line number only) ..... ▶

28020644070

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
Idaho State Tax Commission - Boise

Transaction ID: BFE281CD998494D8B8BC  
Date of Disbursement

Mailing Address P. O. Box 58

09 / 29 / 2008

City Boise State ID Zip Code 83707-0076

Amount of Each Disbursement this Period

188.00

Purpose of Disbursement  
Payroll Taxes

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Internal Revenue Service - Ogden

Transaction ID: BDE83ED1BBE2C47BE809  
Date of Disbursement

Mailing Address Ogden

07 / 01 / 2008

City Ogden State UT Zip Code 84201

Amount of Each Disbursement this Period

1119.94

Purpose of Disbursement  
Payroll Taxes

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Internal Revenue Service - Ogden

Transaction ID: B41E2FDEC68AE402290A  
Date of Disbursement

Mailing Address Ogden

07 / 31 / 2008

City Ogden State UT Zip Code 84201

Amount of Each Disbursement this Period

1119.94

Purpose of Disbursement

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2427.88

TOTAL This Period (last page this line number only) ▶

2802064071



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jake G. Ball - Meridian</p>	<p>Transaction ID: B569476918DC0427DB10 Date of Disbursement</p>
<p>Mailing Address 2529 E. Meadow Wood Ct.</p>	<p><input type="checkbox"/> 07 / <input type="checkbox"/> 01 / <input type="checkbox"/> 2008</p>
<p>City Meridian State ID Zip Code 83646</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="checkbox"/> 3881.19</p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jake G. Ball - Meridian</p>	<p>Transaction ID: B6797405E10E24D4FA56 Date of Disbursement</p>
<p>Mailing Address 2529 E. Meadow Wood Ct.</p>	<p><input type="checkbox"/> 07 / <input type="checkbox"/> 31 / <input type="checkbox"/> 2008</p>
<p>City Meridian State ID Zip Code 83646</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement</p>	<p><input type="checkbox"/> 4868.90</p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Jake G. Ball - Meridian</p>	<p>Transaction ID: BE320856E11AF4FACBEA Date of Disbursement</p>
<p>Mailing Address 2529 E. Meadow Wood Ct.</p>	<p><input type="checkbox"/> 08 / <input type="checkbox"/> 29 / <input type="checkbox"/> 2008</p>
<p>City Meridian State ID Zip Code 83646</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payroll</p>	<p><input type="checkbox"/> 3881.18</p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="checkbox"/> 12631.27</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="checkbox"/></p>

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jake G. Ball - Meridian</p> <p>Mailing Address 2529 E. Meadow Wood Ct.</p> <p>City Meridian State ID Zip Code 83646</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B2969FE5BF4DD4073993</p> <p>Date of Disbursement  <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y          09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period  <input type="text"/> 3881.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Knapp McCarty LLC - Boise</p> <p>Mailing Address 202 N. 9th St. Suite 201</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement July Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC453B7EB8A7448E0970</p> <p>Date of Disbursement  <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y          07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period  <input type="text"/> 314.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Knapp McCarty LLC - Boise</p> <p>Mailing Address 202 N. 9th St. Suite 201</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          State: District:</p> <p>Disbursement For: 2010  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B610DCBFAA6E945C1A45</p> <p>Date of Disbursement  <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y          07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period  <input type="text"/> 314.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text"/> 4509.19</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

28020644074

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
Knapp McCarty LLC - Boise

Transaction ID: B2481C75F49E54C6192C  
Date of Disbursement

Mailing Address 202 N. 9th St. Suite 201

MM / DD / YYYY  
09 / 05 / 2008

City State Zip Code  
Boise ID 83702

Amount of Each Disbursement this Period

314.00

Purpose of Disbursement  
Rent

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
La Loma

Transaction ID: B40FB221B5786438E96F  
Date of Disbursement

Mailing Address 316 Massachusetts Ave.

MM / DD / YYYY  
09 / 11 / 2008

City State Zip Code  
Washington DC 20002-5702

Amount of Each Disbursement this Period

14.55

Purpose of Disbursement  
Meals

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
Le Poulet Rouge - Boise

Transaction ID: BC1F12F04E48E456CA2E  
Date of Disbursement

Mailing Address 106 North Sixth

MM / DD / YYYY  
09 / 15 / 2008

City State Zip Code  
Boise ID 83702

Amount of Each Disbursement this Period

10.28

Purpose of Disbursement  
Meals

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

338.83

TOTAL This Period (last page this line number only) ▶

28020644075

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Linda E. Daniel &amp; Associates, Inc. - Alexandria</p> <p>Mailing Address 128 North Columbus Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Fund Raising Commission</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7AED855898AC4D02BA7</p> <p>Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 4205.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Linda E. Daniel &amp; Associates, Inc. - Alexandria</p> <p>Mailing Address 128 North Columbus Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Fund Raising Commission</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B52EF7645D2714AE591D</p> <p>Date of Disbursement 08 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1300.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Linda E. Daniel &amp; Associates, Inc. - Alexandria</p> <p>Mailing Address 128 North Columbus Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Fund Raising Commission</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B8DE565A6C54048499F3</p> <p>Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 910.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) .....

6415.50

TOTAL This Period (last page this line number only) .....

28020644076

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lowes</p> <p>Mailing Address 3400 N. Eage Rd.</p> <p>City Meridian State ID Zip Code 83642</p> <p>Purpose of Disbursement Event Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BF7CA2C8C62564D76B54</p> <p>Date of Disbursement 08 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 70.73</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) McDonald's - Boise</p> <p>Mailing Address</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BD95DF7363ECF4720872</p> <p>Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 6.03</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mike Crapo - Idaho Falls</p> <p>Mailing Address 2005 Charlotte</p> <p>City Idaho Falls State ID Zip Code 83402</p> <p>Purpose of Disbursement Mileage, airfare, meals reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B4E55E7D7A9204FB48A4</p> <p>Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 532.64</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional) .....</p>	<p>609.40</p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p></p>

2802064077

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Northwest Airlines - Minneapolis</p>	<p>Transaction ID: BAD6B42F4A84142F4ABF Date of Disbursement</p>
<p>Mailing Address 7500 Airline Dr.</p>	<p><input type="checkbox"/> 09 / <input type="checkbox"/> 17 / <input type="checkbox"/> 2008</p>
<p>City Minneapolis State MN Zip Code 55450</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Luggage Fee</p>	<p><input type="checkbox"/> 15.00</p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Northwest Airlines - Minneapolis</p>	<p>Transaction ID: B69462E92E67946E1B23 Date of Disbursement</p>
<p>Mailing Address 7500 Airline Dr.</p>	<p><input type="checkbox"/> 09 / <input type="checkbox"/> 22 / <input type="checkbox"/> 2008</p>
<p>City Minneapolis State MN Zip Code 55450</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Luggage Fee</p>	<p><input type="checkbox"/> 15.00</p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Office Depot - Boise</p>	<p>Transaction ID: B25B1532B6E0F44098F4 Date of Disbursement</p>
<p>Mailing Address 8033 W. Franklin</p>	<p><input type="checkbox"/> 07 / <input type="checkbox"/> 17 / <input type="checkbox"/> 2008</p>
<p>City Boise State ID Zip Code 83704</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement copies</p>	<p><input type="checkbox"/> 88.14</p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="checkbox"/> 118.14</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="checkbox"/></p>

28020644078

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Office Depot - Boise</p>		<p>Transaction ID: BAE50AB6C868745ECA30 Date of Disbursement 08 / 04 / 2008</p>	
<p>Mailing Address 8033 W. Franklin</p>		<p>Amount of Each Disbursement this Period 163.23</p>	
<p>City Boise State ID Zip Code 83704</p>	<p>Purpose of Disbursement Office Supplies</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p>Candidate Name</p>	<p>Category/Type</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	<p>State: District:</p>		
<p><b>B.</b> Full Name (Last, First, Middle Initial) Office Depot - Boise</p>		<p>Transaction ID: B54850E37B3E24111817 Date of Disbursement 09 / 10 / 2008</p>	
<p>Mailing Address 8033 W. Franklin</p>		<p>Amount of Each Disbursement this Period 24.42</p>	
<p>City Boise State ID Zip Code 83704</p>	<p>Purpose of Disbursement Copies</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p>Candidate Name</p>	<p>Category/Type</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	<p>State: District:</p>		
<p><b>C.</b> Full Name (Last, First, Middle Initial) Quiznos - Idaho Falls</p>		<p>Transaction ID: BC38453ABBBC14E4E8A9 Date of Disbursement 09 / 22 / 2008</p>	
<p>Mailing Address 305 Amnon Town</p>		<p>Amount of Each Disbursement this Period 8.85</p>	
<p>City Idaho Falls State ID Zip Code 83406</p>	<p>Purpose of Disbursement Meals</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p>Candidate Name</p>	<p>Category/Type</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	
<p>State: District:</p>	<p>State: District:</p>		
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>		<p>196.50</p>	
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>		<p></p>	

28020644079

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address PO Box 173638</p> <p>City Denver State CO Zip Code 80217-3638</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA6C91D4BC9DC47FA98A</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 45.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address PO Box 173638</p> <p>City Denver State CO Zip Code 80217-3638</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B19B907D6DD554250A6A</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 129.22</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address PO Box 173638</p> <p>City Denver State CO Zip Code 80217-3638</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BC2E57147D9384EF4970</p> <p>Date of Disbursement 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 178.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>		<p>353.34</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		

2802064080

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address PO Box 173638</p> <p>City Denver State CO Zip Code 80217-3638</p> <p>Purpose of Disbursement telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF56D7DDE738545698EB</p> <p>Date of Disbursement 08 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 50.84</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address PO Box 173638</p> <p>City Denver State CO Zip Code 80217-3638</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B511ABF853AF846EE8F9</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 46.01</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Qwest</p> <p>Mailing Address PO Box 173638</p> <p>City Denver State CO Zip Code 80217-3638</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B17B4E77FB5124D72907</p> <p>Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 84.05</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) .....

180.90

TOTAL This Period (last page this line number only) .....

2802064081

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) South Buffet - Washington</p> <p>Mailing Address</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: BE40CA7374E2C4A1B850</p> <p>Date of Disbursement 07 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) South Buffet - Washington</p> <p>Mailing Address</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: BDDE8A006BBAC499DB08</p> <p>Date of Disbursement 07 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) South Buffet - Washington</p> <p>Mailing Address</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: B27B136675C3E4AAFA16</p> <p>Date of Disbursement 09 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 61.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>		<p>121.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Staples - Boise</p> <p>Mailing Address 8059 W Preece Dr.</p> <p>City Boise State ID Zip Code 83709</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BA4E9E4ABC7A1440E9E5</p> <p>Date of Disbursement MM / DD / YYYY 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 187.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) State Department of Education</p> <p>Mailing Address PO Box 83720</p> <p>City Boise State ID Zip Code 83720-0003</p> <p>Purpose of Disbursement Administrative Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BE02F45EF29FC4D8E809</p> <p>Date of Disbursement MM / DD / YYYY 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 344.19</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) The Grove Hotel - Boise</p> <p>Mailing Address 245 S Capitol Blvd.</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Event Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9984672284534C9B95E</p> <p>Date of Disbursement MM / DD / YYYY 07 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 541.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional) .....</p>	<p>1073.22</p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p></p>

2802064083

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) The Idaho Statesman - Boise</p> <p>Mailing Address 1200 North Curtis</p> <p>City Boise State ID Zip Code 83707</p> <p>Purpose of Disbursement Newspaper Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B8C16821EF8884EEEE88</p> <p>Date of Disbursement 07 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 96.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) The Monocle on Capitol Hill - Washington</p> <p>Mailing Address</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B69E59AEC5F3D4C07B9B</p> <p>Date of Disbursement 07 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 99.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) United Parcel Service - Garden City</p> <p>Mailing Address 116 E 42nd St</p> <p>City Garden City State ID Zip Code 83714</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BD9A25083992B4D74B2B</p> <p>Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 9.23</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>		<p>205.34</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		<p></p>

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BD64B785ECD3F4D43AE1</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 733.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) US Senate Restaurant - Washington</p> <p>Mailing Address 1st &amp; C Sts., N.E.</p> <p>City State Zip Code Washington DC 20510</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BB16CBFA9BBBD454C8B1</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 368.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) US Senate Restaurant - Washington</p> <p>Mailing Address 1st &amp; C Sts., N.E.</p> <p>City State Zip Code Washington DC 20510</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BDD787B92E41B44E8BDB</p> <p>Date of Disbursement 08 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 139.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶</p>		<p>1240.86</p>
<p><b>TOTAL</b> This Period (last page this line number only) ..... ▶</p>		<p></p>

28020644085

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

**A.**

Full Name (Last, First, Middle Initial)  
US Senate Restaurant - Washington

Transaction ID: B61748919A21048C9860  
Date of Disbursement

Mailing Address 1st & C Sts., N.E.

09 / 05 / 2008

City Washington State DC Zip Code 20510

Amount of Each Disbursement this Period

Purpose of Disbursement  
Meals

59.94

Candidate Name

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**B.**

Full Name (Last, First, Middle Initial)  
US Senate Restaurant - Washington

Transaction ID: BD59CB590C490428C92A  
Date of Disbursement

Mailing Address 1st & C Sts., N.E.

09 / 19 / 2008

City Washington State DC Zip Code 20510

Amount of Each Disbursement this Period

Purpose of Disbursement  
Meals

105.00

Candidate Name

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**C.**

Full Name (Last, First, Middle Initial)  
USPS

Transaction ID: B14A8AC8A145B4BC8A59  
Date of Disbursement

Mailing Address 141 N. Pamletto

07 / 15 / 2008

City Eagle State ID Zip Code 83616-5198

Amount of Each Disbursement this Period

Purpose of Disbursement  
Postage

16.95

Candidate Name

Category/Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

181.89

TOTAL This Period (last page this line number only) ▶

28020644086

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement Direct Mail PO Box</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BF2E63261506D484490B</p> <p>Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 990.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) USPS - Boise</p> <p>Mailing Address Bannock Station</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Business Reply Permit</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9CC0153EEA8544CD9BC</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 95.22</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) USPS - Boise</p> <p>Mailing Address Bannock Station</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B9EBE82B236B64C34899</p> <p>Date of Disbursement 07 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 84.78</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) .....	1170.00
TOTAL This Period (last page this line number only) .....	

28020644087



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) USPS - Boise</p> <p>Mailing Address Bannock Station</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Postage <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B592AC9F7140A4512856 Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 72.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address PO Box 660720</p> <p>City Dallas State TX Zip Code 75266-0720</p> <p>Purpose of Disbursement <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BCA72C529CA104AA3A1D Date of Disbursement 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 97.64</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Verizon</p> <p>Mailing Address PO Box 660720</p> <p>City Dallas State TX Zip Code 75266-0720</p> <p>Purpose of Disbursement Internet <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B5B91EF8533DC40BD85D Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 76.41</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional) .....</p>	<p>246.05</p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p></p>

28020644089

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless - Baltimore</p> <p>Mailing Address PO Box 17577</p> <p>City Baltimore State MD Zip Code 21297-0513</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B5061D9E9F6714C8A95A Date of Disbursement 07 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 240.03</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless - Baltimore</p> <p>Mailing Address PO Box 17577</p> <p>City Baltimore State MD Zip Code 21297-0513</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B6F0A8EDFAC694727B27 Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 72.54</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless - Baltimore</p> <p>Mailing Address PO Box 17577</p> <p>City Baltimore State MD Zip Code 21297-0513</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B933AA4CC75C14EB7B96 Date of Disbursement 08 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 227.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) .....	540.25
TOTAL This Period (last page this line number only) .....	

2802064090

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless - Baltimore</p> <p>Mailing Address PO Box 17577</p> <p>City Baltimore State MD Zip Code 21297-0513</p> <p>Purpose of Disbursement Telephone <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼          State: District:</p>	<p>Transaction ID: B6068B778C0C44980B3E Date of Disbursement  <input type="text" value="09"/> <input type="text" value="19"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period  <input type="text" value="242.52"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Zions Checking Acct - Boise</p> <p>Mailing Address 890 Main St.</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement bank Fees <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼          State: District:</p>	<p>Transaction ID: B4DE5A981F2DA46AF96B Date of Disbursement  <input type="text" value="07"/> <input type="text" value="21"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period  <input type="text" value="171.78"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Zions Checking Acct - Boise</p> <p>Mailing Address 890 Main St.</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Bank Fees <input type="checkbox"/> Category/Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President          Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼          State: District:</p>	<p>Transaction ID: B96D8C3BFFD7C4D92B16 Date of Disbursement  <input type="text" value="08"/> <input type="text" value="21"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period  <input type="text" value="177.43"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="591.73"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

2802064091

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Zions Checking Acct - Boise</p> <p>Mailing Address 890 Main St.</p> <p>City Boise State ID Zip Code 83702</p> <p>Purpose of Disbursement Bank Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B8F1FCB84CC95480F9C1 Date of Disbursement 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 180.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) US Oncology Inc. Good Government Committee</p> <p>Mailing Address 16825 Northcastle Dr. Suite 1300</p> <p>City Houston State TX Zip Code 77060</p> <p>Purpose of Disbursement In-kind:</p> <p>Candidate Name US Oncology Inc. Good Government Committee</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1067A049131F407EB32 Date of Disbursement 07 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 650.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Margaret Ballard</p> <p>Mailing Address 2107 Sunriae Rim</p> <p>City Boise State ID Zip Code 83705-5145</p> <p>Purpose of Disbursement Meals reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B4E41C8DD6DC44A21853 Date of Disbursement 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 262.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>1093.55</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

2802064092

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Margaret Ballard</p> <p>Mailing Address 2107 Sunriae Rim</p> <p>City Boise State ID Zip Code 83705-5145</p> <p>Purpose of Disbursement Meals, Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B89A93D884A7B44EEBBB</p> <p>Date of Disbursement 08 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 189.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Dan Cohen</p> <p>Mailing Address 4856 Old Dominion Dr.</p> <p>City Arlington State VA Zip Code 22207-2743</p> <p>Purpose of Disbursement Event Expense Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B0C88D50F6304090A42</p> <p>Date of Disbursement 08 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 2338.71</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mike Crapo</p> <p>Mailing Address 2005 Charlotte</p> <p>City Idaho Falls State ID Zip Code 83402-5614</p> <p>Purpose of Disbursement Internet Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B5F83609B8E834BDB927</p> <p>Date of Disbursement 07 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 178.59</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>2706.75</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p>2706.75</p>

2802064093

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mike Crapo</p>	<p>Transaction ID: B956342D90FC349899E6 Date of Disbursement</p>
<p>Mailing Address 2005 Charlotte</p>	<p><input type="text" value="07"/> <sup>M</sup> / <input type="text" value="16"/> <sup>D</sup> / <input type="text" value="2008"/> <sup>Y</sup></p>
<p>City Idaho Falls      State ID      Zip Code 83402-5614</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Meals, Telephone</p>	<p><input type="text" value="422.67"/></p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mike Crapo</p>	<p>Transaction ID: BC8B4685E415242F2873 Date of Disbursement</p>
<p>Mailing Address 2005 Charlotte</p>	<p><input type="text" value="07"/> <sup>M</sup> / <input type="text" value="16"/> <sup>D</sup> / <input type="text" value="2008"/> <sup>Y</sup></p>
<p>City Idaho Falls      State ID      Zip Code 83402-5614</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Mileage</p>	<p><input type="text" value="712.47"/></p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) The Keeper Of Stationary</p>	<p>Transaction ID: BD06CC269AE244D3698A Date of Disbursement</p>
<p>Mailing Address</p>	<p><input type="text" value="07"/> <sup>M</sup> / <input type="text" value="31"/> <sup>D</sup> / <input type="text" value="2008"/> <sup>Y</sup></p>
<p>City Washington      State DC      Zip Code 20510</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Flags</p>	<p><input type="text" value="303.00"/></p>
<p>Candidate Name</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:      District:</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary    <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

<p>SUBTOTAL of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1438.14"/></p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

2802064094

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
Shirley Taylor

Transaction ID: B3D1D04B0DBB0407B9C7  
Date of Disbursement

Mailing Address 1225 Virginia Cir

M M /  D D /  Y Y Y Y  
08 / 28 / 2008

City State Zip Code  
Nampa ID 83687-8670

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement  
Meals

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

2802064095

SUBTOTAL of Disbursements This Page (optional) .....

100.00

TOTAL This Period (last page this line number only) .....

57711.21

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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 20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
Mike Crapo for U.S. Senate

A.

Full Name (Last, First, Middle Initial)  
William A. Duncan

Transaction ID: B35A5041FA1464AE6A0D  
Date of Disbursement

Mailing Address Rr1 Box 253aa

MM / DD / YYYY  
07 / 23 / 2008

City State Zip Code  
Maconb OK 74852

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement  
Refund

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

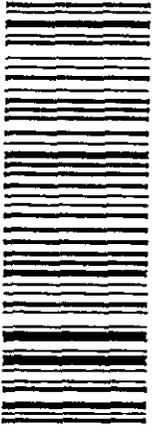
TOTAL This Period (last page this line number only) ▶

500.00

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# United States Senate

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DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

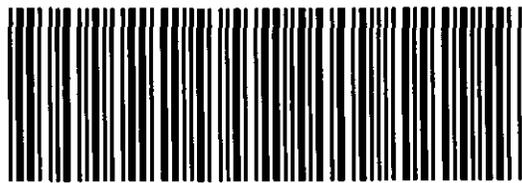
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PREPARER RD DATE PREPARED 10-21-08

2802064098



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