

09 OCT 14 PM 2:42 2009 OCT 14 AM 8:39

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

J O H N E V A N S F O R S E N A T E

J O H N V . E V A N S , T R E A S U R E R

ADDRESS (number and street)

P . O . B O X 1 1 8 8

Check if different than previously reported. (ACC)

B U R L E Y I D 8 3 3 1 8 -

2. FEC IDENTIFICATION NUMBER ▼

C

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

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 M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on M M / D D / Y Y Y Y

in the State of

5. Covering Period 0 7 / 0 1 / 2 0 0 9 through 0 9 / 3 0 / 2 0 0 9

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 John V. Evans, Sr.

Signature of Treasurer

*John V. Evans Sr.*

Date

0 9 / 3 0 / 2 0 0 9

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)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

John Evans for Senate

Report Covering the Period: From:

<sup>M</sup> <sup>M</sup> / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>  
0 7 / 0 1 / 2 0 0 9

To:

<sup>M</sup> <sup>M</sup> / <sup>D</sup> <sup>D</sup> / <sup>Y</sup> <sup>Y</sup> <sup>Y</sup> <sup>Y</sup>  
0 9 / 3 0 / 2 0 0 9

	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))....	\$ 0.00	\$ 0.00
(b) Total Contribution Refunds (from Line 20(d)).....	\$ 0.00	\$ 0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	\$ 0.00	\$ 0.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	\$ 1,579.50	\$ 1,579.50
(b) Total Offsets to Operating Expenditures (from Line 14).....	\$ 0.00	\$ 0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	\$ 1,579.50	\$ 1,579.50
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>\$ 5,975.51</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>\$ 0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>\$ 0.00</b>	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

29020331713

**DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 12/2003)

of Receipts

Page 3

Write or Type Committee Name  
**John Evans for Senate**

Report Covering the Period: From: **07 / 01 / 2009** To: **09 / 30 / 2009**

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		
(i) Itemized (use Schedule A).....		
(ii) Unitemized.....		
(iii) TOTAL of contributions from individuals ▶		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..		
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>		
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....		
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....		
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>		
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>		
<b>16. TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	,718.19	4,952.07
	,718.19	4,952.07

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	,	1,579.50
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	,	,
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	,	,
(b) Of All Other Loans.....	,	,
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	,	,
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	,	,
(b) Political Party Committees.....	,	,
(c) Other Political Committees (such as PACs).....	,	,
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	,	,
21. OTHER DISBURSEMENTS.....	,	,
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	,	1,579.50

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	,	59,257.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	,	718.19
25. SUBTOTAL (add Line 23 and Line 24).....	,	59,975.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	,	,
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	,	59,975.51

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

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

FOR LINE NUMBER: (check only one)	PAGE	OF
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b
<input type="checkbox"/> 11d 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)  
**John Evans for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**D.L. Evans Bank**

Mailing Address  
**P.O. Box 1188**

City State Zip Code  
**Burley ID 83318**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
**0 9 3 0 2 0 0 9**

**Bank checking interest**  
Amount of Each Receipt this Period  
**0.7**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
**D.L. Evans Bank**

Mailing Address  
**P.O. Box 1188**

City State Zip Code  
**Burley ID 83318**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
**0 8 1 1 2 0 0 9**

**CD Interest**  
Amount of Each Receipt this Period  
**718.12**

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

Limits Increased Due to Opponent's Spending (2 U.S.C. §441a(f)/441a-1)

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

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

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**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)

PAGE OF

<input 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)

John Evans for Senate

Full Name (Last, First, Middle Initial)

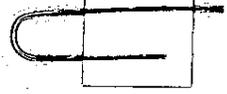
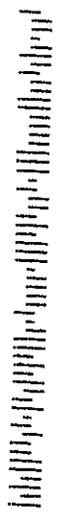
<b>A.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  \$ . . .  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  \$ . . .  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period  \$ . . .  Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City	State Zip Code	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	\$ . . .	00
<b>TOTAL</b> This Period (last page this line number only).....▶	\$ . . .	00

29020331717



397 N. Overland Avenue  
P.O. Box 1188  
Burley, Idaho 83318

TO: Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

RECEIVED  
FEC MAIL CENTER  
2009 OCT 14 AM 8:39

8T71EE02062

NANCY ERICKSON  
SECRETARY

PAMELA S. GAVIN  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-2116  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION 10-14-09  
Date of Receipt

POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 10-14-09

29020331719

29020331720

