

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

Section I

Name of candidate or Political Committee and Chairperson <u>L. George Orre</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>3</u>
Mailing Address <u>PO Box 152</u>	City and Zip <u>Hansen, 83334</u>	Home Phone <u>208-423-5751</u>	Work Phone <u>208-736-4668</u>
Name of Political Treasurer <u>Chad H. Orre</u>			
Mailing Address <u>PO Box 304</u>	City and Zip <u>Hansen, 83334</u>	Home Phone <u>208-423-5445</u>	Work Phone <u>208-308-6268</u>

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
This report is for the period from 1/1/2015 through 12/31/2015

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
- 7 Day Pre-General Report 30 Day Post-General Report Annual Report
- Semi Annual report (Statewide Candidates Only)
- Is this Report an amendment? Yes No

RECEIVED
 2016 JAN 19 PM 2:37
 TWIN FALLS
 COUNTY CLERK

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

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

Section IV

SUMMARY

To reach your Calendar Year To Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Year*	\$ 0	\$ 0
Line 2. Enter Cash Balance **	\$ 0	\$ 0
Line 3. Total Contributions (Enter amount on line 5, Page 2)	\$ 0	\$ 0
Line 4. Subtotal (Add lines 1, 2 and 3)	\$ 0	\$ 0
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$ 0	\$ 0
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$ 0	\$ 0
Line 7. Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0	\$ 0

* This same figure should be entered on Line 1 of all reports filed this calendar year.
 ** This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.
 Note: The closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Return This Report to:
 Kristina Glascock
 Twin Falls County
 PO Box 126
 Twin Falls, ID 83303
 P - 208-736-4004
 F - 208-736-4182
 Valerie.varadi@co.twin-falls.id.us

Section V

CERTIFICATION

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

Chad H. Orre
 Signature of Political Treasurer



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

C-2
Rev. 5/11

Section I

Name of Candidate or Political Committee and Chairperson L. George Urle		Office Sought (if candidate) County Commissioner		District (if any) 3
Mailing Address PO Box 152	City and Zip Hansen, 83334	Home Phone 208-423-5751	Work Phone 208-736-4067	
Name of Political Treasurer Chad H. Urle				
Mailing Address PO Box 304	City and Zip Hansen, 83334	Home Phone 208-423-5445	Work Phone 208-308-6268	

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
 This report is for the period from 01/01/2014 through 12/31/2014.

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
- 7 Day Pre-General Report 30 Day Post-General Report Annual Report
- Semi-Annual Report (Statewide Candidates Only)

Is this a Termination Report: Yes No

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

I hereby certify that I have received no contributions and have made no expenditures during this reporting period.

Section IV

SUMMARY

To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Year*	\$ XXXXXX	\$ 0.00
Line 2: Enter Beginning Cash Balance**	\$ 0.00	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ 0.00	\$ 0.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 0.00	\$ 0.00
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ 0.00	\$ 0.00
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ 0.00	\$ 0.00
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0.00	

*This same figure should be entered on line 1 of all reports filed this calendar year.

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Note: The closing cash balance for the current reporting period appears on the next report as the beginning cash on hand.

Section V

Return This Report To:
Ben Ysursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
Phone: (208) 334-2852
Fax: (208) 334-2282

I, Chad H. Urle, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Chad H. Urle
Signature of Political Treasurer

RECEIVED
JAN 30 AM 8:07
TWIN FALLS
COUNTY CLERK



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

C-2
Rev. 5/11

Section I

Name of Candidate or Political Committee and Chairperson L. George Urie		Office Sought (if candidate) County Commissioner	District (if any) 3
Mailing Address P.O. Box 152	City and Zip Hansen 83334	Home Phone 208-423-5751	Work Phone
Name of Political Treasurer Chad Urie			
Mailing Address P.O. Box 304	City and Zip Hansen 83334	Home Phone 208-423-5445	Work Phone 208-308-6268

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
 This report is for the period from 1 / 1 / 13 through 12 / 31 / 13

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
 7 Day Pre-General Report 30 Day Post-General Report Annual Report
 Semi-Annual Report (Statewide Candidates Only)

Is this a Termination Report: Yes No

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

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Section IV

SUMMARY

To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Year*	\$ XXXXXX	\$ 0.00
Line 2: Enter Beginning Cash Balance**	\$ 0.00	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ 0.00	\$ 0.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 0.00	\$ 0.00
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ 0.00	\$ 0.00
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ 0.00	\$ 0.00
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0.00	

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Note: The closing cash balance for the current reporting period appears on the next report as the beginning cash on hand.

Section V

Return This Report To:
Ben Yursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
Phone: (208) 334-2852
Fax: (208) 334-2282

I, Chad H. Urie, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Name of Political Treasurer

Chad H. Urie
Signature of Political Treasurer

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

Section I

Name of candidate or Political Committee and Chairperson <u>L. Scarge Urie</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>3</u>
Mailing Address <u>PO Box 152</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>208 423-5751</u>	Work Phone
Name of Political Treasurer <u>Chad Urie</u>			
Mailing Address <u>PO Box 304</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>208-423-5445</u>	Work Phone <u>208 308 6268</u>

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
This report is for the period from 11/17/12 through 12/31/12

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
- 7 Day Pre-General Report 30 Day Post-General Report Annual Report
- Semi Annual report (Statewide Candidates Only)
- Is this Report an amendment? Yes No Is this a Termination Report? Yes No

RECEIVED
 2013 FEB 12 AM 8:06
 TWIN FALLS
 COUNTY CLERK

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Instructions: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year To Date" figures in Column II, Section IV.

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

Section IV

SUMMARY

To reach your Calendar Year To Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Year*	\$ XXXXXXXXXXXX	\$ 0.00
Line 2. Enter Cash Balance **	\$ 0	\$ XXXXXXXXXXXX
Line 3. Total Contributions (Enter amount on line 5, Page 2)	\$ 0	\$ 0
Line 4. Subtotal (Add lines 1, 2 and 3)	\$ 0	\$ 0
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$ 0	\$ 0
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$ 0	\$ 0
Line 7. Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0	\$ 0

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 ** This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.
 Note: The closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Return This Report To:

KRISTINA GLASCOCK
TWIN FALLS COUNTY
PO BOX 126
TWIN FALLS, ID. 83303
208-736-4004
208-736-4182

Section V

CERTIFICATION

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

Chad H. Urie
Signature of Political Treasurer

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

Section I

Name of candidate or Political Committee and Chairperson <u>L. George Urie</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>3</u>
Mailing Address <u>PO Box 152</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>208 423-5751</u>	Work Phone
Name of Political Treasurer <u>Chad Urie</u>			
Mailing Address <u>PO Box 304</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>208-423-5445</u>	Work Phone <u>208 308 6268</u>

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
This report is for the period from Oct 22 1 2012 through Nov 16 1 2012

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
 7 Day Pre-General Report 30 Day Post-General Report Annual Report
 Semi Annual report (Statewide Candidates Only)

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

RECEIVED
TWIN FALLS
COUNTY CLERK
2012 DEC 13 AM 7:56

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Instructions: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year To Date" figures in Column II, Section IV.

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Section IV

SUMMARY

To reach your Calendar Year To Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Year*	\$ XXXXXXXXXXXX	\$ 0.00
Line 2. Enter Cash Balance **	\$ 0	\$ XXXXXXXXXXXX
Line 3. Total Contributions (Enter amount on line 5, Page 2)	\$ 0	\$ 0
Line 4. Subtotal (Add lines 1, 2 and 3)	\$ 0	\$ 0
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$ 0	\$ 0
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$ 0	\$ 0
Line 7. Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0	\$ 0

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Return This Report To:

KRISTINA GLASCOCK
TWIN FALLS COUNTY
PO BOX 126
TWIN FALLS, ID. 83303
208-736-4004
208-736-4182

Section V

CERTIFICATION

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

Chad H. Urie
Signature of Political Treasurer

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

2012 OCT 30 AM 10:11

Section I

Name of candidate or Political Committee and Chairperson <u>George Uire</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>WINFALLS</u>
Mailing Address <u>PO Box 152</u>	City and Zip <u>Hanson 83334</u>	Home Phone <u>208-423-5751</u>	Work Phone <u>COUNTY CLERK</u>
Name of Political Treasurer <u>Chad Uire</u>		Home Phone <u>208-423-5445</u>	Work Phone <u>208-908-6268</u>
Mailing Address <u>PO Box 304</u>	City and Zip <u>Hanson 83334</u>	Home Phone <u>208-423-5445</u>	Work Phone <u>208-908-6268</u>

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
This report is for the period from 10/1/12 through 10/21/12

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
- 7 Day Pre-General Report 30 Day Post-General Report Annual Report
- Semi Annual report (Statewide Candidates Only)
- Is this Report an amendment? Yes No Is this a Termination Report? Yes No

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Instructions: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year To Date" figures in Column II, Section IV.

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

Section IV

SUMMARY

To reach your Calendar Year To Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Year*	\$ XXXXXXXXXXXX	\$ 0.00
Line 2. Enter Cash Balance **	\$ 0	\$ XXXXXXXXXXXX
Line 3. Total Contributions (Enter amount on line 5, Page 2)	\$ 0	\$ 0
Line 4. Subtotal (Add lines 1, 2 and 3)	\$ 0	\$ 0
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$ 0	\$ 0
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$ 0	\$ 0
Line 7. Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0	\$ 0

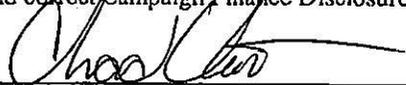
* This same figure should be entered on Line 1 of all reports filed this calendar year.
** This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.
Note: The closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Return This Report To:

KRISTINA GLASCOCK
TWIN FALLS COUNTY
PO BOX 126
TWIN FALLS, ID. 83303
208-736-4004
208-736-4182

Section V **CERTIFICATION**

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



Signature of Political Treasurer

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

RECEIVED
 2012 OCT 10 AM 8:07
 TWIN FALLS COUNTY

Section I

Name of candidate or Political Committee and Chairperson <u>La. George Urie</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>35</u>
Mailing Address <u>P.O. Box 152</u>	City and Zip <u>Hansen, 83334</u>	Home Phone <u>208-423-5751</u>	Work Phone
Name of Political Treasurer <u>Chad Urie</u>			
Mailing Address <u>P.O. Box 304</u>	City and Zip <u>Hansen, 83334</u>	Home Phone <u>208-423-5445</u>	Work Phone <u>208-308-6268</u>

Change of address for: Candidate or Political Committee Political Treasurer

Section II TYPE OF REPORT

This filing is an: Original Amendment
 This report is for the period from 5/26/12 through 9/30/12

7 Day Pre-Primary Report 30-Day Post-Primary Report October-10 Pre-General Report

7 Day Pre-General Report 30 Day Post-General Report Annual Report

Semi Annual report (Statewide Candidates Only)

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

Section III STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Reasons: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year To Date" figures in Column II, Section IV.

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

Section IV SUMMARY

To reach your Calendar Year To Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Year*	\$ XXXXXXXXXXXX	\$ 0.00
Line 2. Enter Cash Balance **	\$ 0	\$ XXXXXXXXXXXX
Line 3. Total Contributions (Enter amount on line 5, Page 2)	\$ 0	\$ 0
Line 4. Subtotal (Add lines 1, 2 and 3)	\$ 0	\$ 0
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$ 0	\$ 0
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$ 0	\$ 0
Line 7. Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0	\$ 0

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Note: The closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Return This Report To:

KRISTINA GLASCOCK
TWIN FALLS COUNTY
PO BOX 126
TWIN FALLS, ID. 83303
208-736-4004
208-736-4182

Section V CERTIFICATION

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

Chad Urie
Signature of Political Treasurer



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

C-2
Rev. 5/11

Section I

Name of Candidate or Political Committee and Chairperson L. George Urie		Office Sought (if candidate) County Commissioner	District (if any) 3
Mailing Address PO Box 152	City and Zip Hansen 83334	Home Phone (208) 423-5751	Work Phone (208) 736-4067
Name of Political Treasurer Chad Urie			
Mailing Address PO Box 304	City and Zip Hansen 83334	Home Phone (208) 423-5445	Work Phone (208) 308-6268

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
 This report is for the period from 4 / 30 / 2012 through 5 / 25 / 2012.

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
 7 Day Pre-General Report 30 Day Post-General Report Annual Report
 Semi-Annual Report (Statewide Candidates Only)

Is this a Termination Report: Yes No

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

I hereby certify that I have received no contributions and have made no expenditures during this reporting period.

Section IV

SUMMARY

To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Year*	\$ XXXXXX	\$ 0.00
Line 2: Enter Beginning Cash Balance**	\$ 0.00	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ 0.00	\$ 0.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 0.00	\$ 0.00
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Section V

Return This Report To:
Ben Yursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
Phone: (208) 334-2852
Fax: (208) 334-2282

I, Chad H. Urie, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Chad H. Urie
Signature of Political Treasurer

RECEIVED
 2012 JUN 13 PM 2:07
 MIN FALLS COUNTY CLERK

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

Section I

Name of candidate or Political Committee and Chairperson <u>L. George Urie</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>3</u>
Mailing Address <u>PO Box 152</u>	City and Zip <u>Hansen, ID 83334</u>	Home Phone <u>(208) 423-5751</u>	Work Phone
Name of Political Treasurer <u>Chad Urie</u>		Home Phone	Work Phone
Mailing Address <u>PO Box 304</u>	City and Zip <u>Hansen, ID 83334</u>	Home Phone <u>(208) 423-5445</u>	Work Phone <u>(208) 423-308-6268</u>

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
This report is for the period from 1/1/12 through 4/29/12

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
 7 Day Pre-General Report 30 Day Post-General Report Annual Report
 Semi Annual report (Statewide Candidates Only)
 Is this Report an amendment? Yes No Is this a Termination Report? Yes No

RECEIVED
 2012 MAY -8 AM 7:57
 TWIN FALLS
 COUNTY CLERK

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Disclosures: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year To Date" figures in Column II, Section IV.
 I hereby certify that I have received no contributions and have made no expenditures during this reporting period.

Section IV

SUMMARY

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Line 1. Cash on Hand January 1, This Year*	\$ XXXXXXXXXXXX	\$ 0.00
Line 2. Enter Cash Balance **	\$	\$ XXXXXXXXXXXX
Line 3. Total Contributions (Enter amount on line 5, Page 2)	\$	\$ 0
Line 4. Subtotal (Add lines 1, 2 and 3)	\$	\$ 0
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$	\$ 0
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$	\$ 0
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Return This Report To:

KRISTINA GLASCOCK
 TWIN FALLS COUNTY
 PO BOX 126
 TWIN FALLS, ID. 83303
 208-736-4004
 208-736-4182

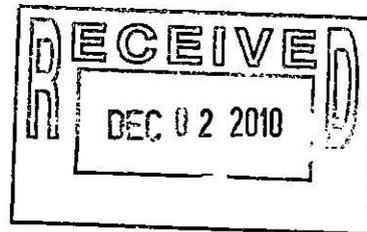
Section V

CERTIFICATION

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


 Signature of Political Treasurer

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



Section I

Name of candidate or Political Committee and Chairperson <u>L. George Urie</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>3</u>
Mailing Address <u>PO Box 152</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>423-5751</u>	Work Phone
Name of Political Treasurer <u>Chad Urie</u>		Home Phone <u>423-5445</u>	Work Phone <u>308-6268</u>
Mailing Address <u>PO Box 304</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>423-5445</u>	Work Phone <u>308-6268</u>

Change of address for: Candidate or Political Committee Political treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
This report is for the period from 10/18/10 through 11/1/10

7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report

7 Day Pre-General Report 30 Day Post-General Report Annual Report

Semi Annual report (Statewide Candidates Only)

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

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year To Date" figures in Column II, Section IV.

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

Section IV

SUMMARY

To reach your Calendar Year To Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Year*	\$ XXXXXXXXXXXX	\$ 0.00
Line 2. Enter Cash Balance.**	\$ 0	\$ XXXXXXXXXXXX
Line 3. Total Contributions (Enter amount on line 5, Page 2)	\$ 0	\$ 0
Line 4. Subtotal (Add lines 1, 2 and 3)	\$ 0	\$ 0
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$ 0	\$ 0
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$ 0	\$ 0
Line 7. Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0	\$ 0

* This same figure should be entered on Line 1 of all reports filed this calendar year.

** This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.

Note: The closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Return This Report To:
Twin Falls County Elections
PO Box 126
Twin Falls, Id. 83303
Tele, 208/736/4004
Fax, 208/736/4182

Section V CERTIFICATION

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

Chad H. Urie
Signature of Political Treasurer

C-2
Rev. 11/07

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

Section I

Name of candidate or Political Committee and Chairperson <u>L. George Urie</u>		Office Sought (if candidate) <u>COMMISSIONER</u>	District (if any) <u>3</u>
Mailing Address <u>P.O. Box 152 Hansen Id.</u>	City and Zip <u>HANSEN 83334</u>	Home Phone <u>423-5751</u>	Work Phone <u>736-4067</u>
Name of Political Treasurer <u>Chad Urie</u>			
Mailing Address <u>P.O. Box 304</u>	City and Zip <u>HANSEN 83334</u>	Home Phone <u>423-5445</u>	Work Phone

Change of address for: Candidate or Political Committee Political treasurer

Section II

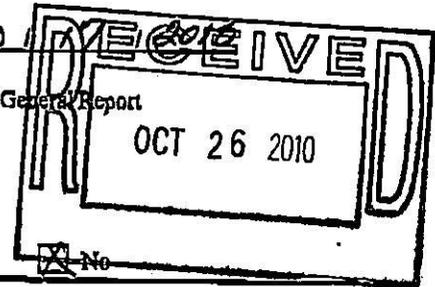
TYPE OF REPORT

This filing is an: Original Amendment
This report is for the period from 12/1 2010 through 10

7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
 7 Day Pre-General Report 30 Day Post-General Report Annual Report

Semi Annual report (Statewide Candidates Only)

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



Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year To Date" figures in Column II, Section IV.

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

Section IV

SUMMARY

To reach your Calendar Year To Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Year*	\$ XXXXXXXXXXX	\$ 0.00
Line 2. Enter Cash Balance.**	\$	\$ XXXXXXXXXXX
Line 3. Total Contributions (Enter amount on line 5, Page 2)	\$	\$
Line 4. Subtotal (Add lines 1, 2 and 3)	\$	\$
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$	\$
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$	\$
Line 7. Outstanding Debt to Date (Enter amount from line 18, page 2)	\$	\$

* This same figure should be entered on Line 1 of all reports filed this calendar year.

** This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.

Note: The closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Return This Report To:

Twin Falls County Elections
PO Box 126
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Fax, 208/736/4182

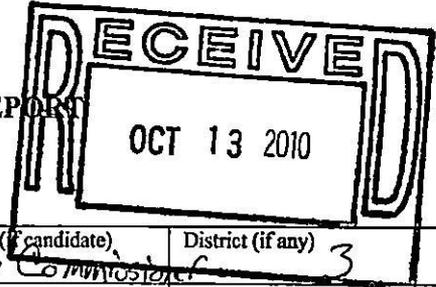
Section V

CERTIFICATION

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

Chad H. Urie
Signature of Political Treasurer

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



Section I

Name of candidate or Political Committee and Chairperson <u>L. George Urie</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>3</u>
Mailing Address <u>Po Box 152</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>423-5751</u>	Work Phone
Name of Political Treasurer <u>Chad Urie</u>			
Mailing Address <u>Po Box 304</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>423-5445</u>	Work Phone <u>308-6268</u>

Change of address for: Candidate or Political Committee Political treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
 This report is for the period from JUNE 15th 2010 through SEPT 130 2010

7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report

7 Day Pre-General Report 30 Day Post-General Report Annual Report

Semi Annual report (Statewide Candidates Only)

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

Section III STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year To Date" figures in Column II, Section IV.

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

Section IV SUMMARY

To reach your Calendar Year To Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).	COLUMN I This Period	COLUMN II Calendar Year To Date
Line 1. Cash on Hand January 1, This Year*	\$ XXXXXXXXXXXX	\$ 0.00
Line 2. Enter Cash Balance **	\$ 0	\$ XXXXXXXXXXXX
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Line 4. Subtotal (Add lines 1, 2 and 3)	\$ 0	\$ 0
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$ 0	\$ 0
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Line 7. Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0	\$ 0

* This same figure should be entered on Line 1 of all reports filed this calendar year.

** This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.

Note: The closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Return This Report To:

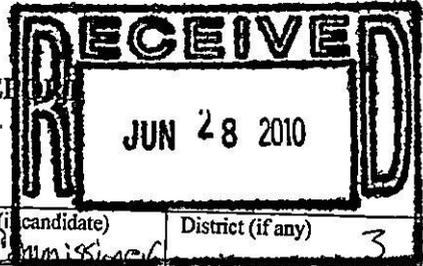
Twin Falls County Elections
PO Box 126
Twin Falls, Id. 83303
Tele, 208/736/4004
Fax, 208/736/4182

Section V CERTIFICATION

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

Chad H. Urie
Signature of Political Treasurer

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



Section I

Name of candidate or Political Committee and Chairperson <u>L. George Urre</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>3</u>
Mailing Address <u>Po Box 152</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>208-423-5751</u>	Work Phone <u>208-736-4067</u>
Name of Political Treasurer <u>Chad Urre</u>			
Mailing Address <u>Po Box 304</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>208-423-5445</u>	Work Phone <u>208-423-308-6268</u>

Change of address for: Candidate or Political Committee Political treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
This report is for the period from May 1 10 2010 through June 14 2010

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
 7 Day Pre-General Report 30 Day Post-General Report Annual Report
 Semi Annual report (Statewide Candidates Only)
 Is this Report an amendment? Yes No Is this a Termination Report? Yes No

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you have no contributions or expenditures during this reporting period, check the box next to the statement below and sign this report. Be sure to carry forward the appropriate "Calendar Year To Date" figures in Column II, Section IV.
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Section IV

SUMMARY

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Line 4. Subtotal (Add lines 1, 2 and 3)	\$ <u>0</u>	\$ <u>0</u>
Line 5. Total Expenditures (Enter amount from line 11, Page 2)	\$ <u>0</u>	\$ <u>0</u>
Line 6. Cash Balance at Close of Period (Subtract Line 5 from Line 4)**	\$ <u>0</u>	\$ <u>0</u>
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Return This Report To:

Twin Falls County Elections
PO Box 126
Twin Falls, Id. 83303
Tele, 208/736/4004
Fax, 208/736/4182

Section V

CERTIFICATION

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

Chad Urre
Signature of Political Treasurer

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

Section I

Name of candidate or Political Committee and Chairperson <u>L George Urie</u>		Office Sought (if candidate) <u>County Commissioner</u>	District (if any) <u>3</u>
Mailing Address <u>PO Box 152</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>423-5751</u>	Work Phone
Name of Political Treasurer <u>Chad Urie</u>			
Mailing Address <u>PO Box 304</u>	City and Zip <u>Hansen 83334</u>	Home Phone <u>423-5445</u>	Work Phone <u>308-6268</u>

Change of address for: Candidate or Political Committee Political treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment
This report is for the period from 11/1/10 through 5/19/10

- 7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report
 7 Day Pre-General Report 30 Day Post-General Report Annual Report
 Semi Annual report (Statewide Candidates Only)
 Is this Report an amendment? Yes No Is this a Termination Report? Yes No

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Section V CERTIFICATION

I, Chad Urie, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report required by law.

Chad Urie
Signature of Political Treasurer

