

DECLARATION OF CANDIDACY

I, the undersigned, affirm that I am a qualified elector of the City of MERIDIAN, State of Idaho, and that I have resided in the city for at least thirty (30) days. I hereby declare myself to be a candidate for the office of City Council, Seat 1, for a term of 4 years, to be voted for at the election to be held on the 8th day of NOVEMBER, 2011, and certify that I possess the legal qualifications to fill said office, and that my residence address is 1997 W. KRISTEN WAY
MERIDIAN, ID 83646

JOAN T. SHAWCROFT

(Signed)

Subscribed and sworn to before me this 25th day of August, 2011.



Signed Notary Public

Residing at

Commission expires

Sandra Thweatt
Kuna ID
May 28, 2016

OFFICIAL USE ONLY

Before accepting this Declaration of Candidacy, the City Clerk (or designee) must verify:
This Declaration is accompanied by:

The attached Petition of Candidacy signed by at least five qualified city electors with the attached verification from the county clerk,

OR

A nonrefundable filing fee of \$40.

The City Clerk (or designee) must verify that the person submitting this declaration is a qualified city elector as defined in Idaho Code 50-402(c) and that the residence address provided above matches the address on the individual's voter registration.

This declaration was accepted by

Jaycee Holman, Clerk
Name, Title

on August 29, 2011 at 2:14 p.m.
Date Time



**APPOINTMENT AND CERTIFICATION OF POLITICAL TREASURER
FOR CANDIDATES AND COMMITTEES**

C-1
Rev. 08/07

(Please Print or Type)

Pursuant to Section 67-6603(c1), Idaho Code. No contribution shall be received or expenditure made by or on behalf of a candidate or political committee until he or she appoints a political treasurer and certifies the name and address of the treasurer to the Secretary of State.

Certification is for (check appropriate box below):

CANDIDATE:

Name of Candidate:	John T. Shawcroft		
Home Phone:	887-9513	Work Phone:	455-3041
		Cell Phone:	697-6273
Office Sought:	City Council	Seat (if applicable):	1
Candidate Mailing address:	1997 Kristen Way, Meridian 83646		
Candidate email address:	jsmallcraft@hotmail.com		

COMMITTEE:

Name of Committee:			
Name of Committee Chairman:			
Miscellaneous:	Home Phone:	Work Phone:	Cell Phone:
Measure:	Committee Mailing address:		
Candidate/Measure:	Chairman email address:		

I, **John T. Shawcroft** CERTIFICATION AND APPOINTMENT
Name of Candidate or Committee Chairman, do hereby certify and appoint the following individual who is a registered elector of the State of Idaho as the political treasurer for the above named candidate or committee:

Name of Political Treasurer:	Veronica Shawcroft		
Home Phone:	887-9513	Work Phone:	
		Cell Phone:	
Treasurer Mailing address:	1997 Kristen Way, Meridian 83646		
Treasurer email address:			

Signature of Candidate or Committee Chairman

I, **Veronica Shawcroft**
Name of Political Treasurer, do hereby accept the appointment as political treasurer for the above named candidate or committee.

Signature of Political Treasurer



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

RECEIVED

C-2
Rev. 10/07

OCT 03 2011

City of Meridian
City Clerk Office

Section I

Name of Candidate or Political Committee and Chairperson John T. Shawcroft		Office Sought (if candidate) City Council	Seat (if any) 1
Mailing Address 1997 Kristen Way	City and Zip Meridian, 83646	Home Phone 887-9513	Work Phone 455-3041
Name of Political Treasurer Veronica Shawcroft			
Mailing Address 1997 Kristen Way	City and Zip Meridian 83646	Home Phone 887-9513	Work Phone

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT
This filing is an: Original Amendment
This report is for the period from 9/9/2011 through 10/3/2011.
 October 10 Pre-General Report 7 Day Pre-General Report 30 Day Post-General Report
 Annual Report

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.

**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 the beginning cash on hand.

Section V

I, Veronica Shawcroft, hereby certify that the information in this
Name of Political Treasurer

report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Veronica Shawcroft
Signature of Political Treasurer



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

C-2
RECEIVED
NOV 02 2011
REV. 10/07

Section I

CITY OF ~~CH~~ MERIDIAN

Name of Candidate or Political Committee and Chairperson John Shawcroft		Office Sought (if candidate) CITY CLERKS OFFICE	
Mailing Address 1997 W Kristen Way		City and Zip Meridian 83646	Home Phone 208-887-9513
Name of Political Treasurer Veronica Shawcroft		Work Phone 208-697-6273	
Mailing Address 1997 W Kristen Way		City and Zip Meridian 83464	Home Phone 208-887-9513
		Work Phone 208-465-5725	

Change of address for: Candidate or Political Committee Political Treasurer

Section II

This filing is an: Original Amendment
This report is for the period from 10/10/11 through 11/01/11

TYPE OF REPORT

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

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	\$ _____
Line 2: Enter Beginning Cash Balance**	\$ 0	\$ XXXXXX
Line 3: Total Contributions (Enter amount from 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)	\$ 450	\$ 450
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ 0	\$ 0
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 450	

*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 the beginning cash on hand.

Section V

I, Veronica Shawcroft, hereby certify that the information in this
Name of Political Treasurer

report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Veronica Shawcroft
Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: **John Shawcroft**

		Total This Period
Contributions		
①	Unitemized Contributions (\$50 and less) # of Contributors _____	+ \$
②	Itemized Contributions (Total of all Schedule A sheets)	+ \$
③	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+ \$
④	Loans (Total of all New Loan amounts from Schedule D sheets)	+ \$
⑤	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	= \$0

Expenditures		
⑥	Unitemized Expenditures (\$25 and less) # of Expenditures _____	+ \$
⑦	Itemized Expenditures (Total of all Schedule B sheets)	+ \$450.00
⑧	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$
⑨	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+ \$
⑩	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+ \$
⑪	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	= \$450.00

Loans, Credit Cards and Debt		
⑫	Outstanding Balance from previous reporting period	+ \$0
⑬	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+ \$
⑭	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+ \$450.00
⑮	Subtotal	= \$0
⑯	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	- \$
⑰	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	- \$
⑱	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	= \$450.00

Pledged Contributions		
⑲	Unitemized Pledged Contributions (\$50 and less) # of Pledges _____	+ \$
⑳	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$
㉑	Total Pledged Contributions this period	= \$0

SCHEDULE B
ITEMIZED EXPENDITURES
 Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee:

Purpose Codes

- | | |
|--|---|
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) | N Newspaper & Other Periodical Advertising |
| B Broadcast Advertising (Radio, TV & Internet) | O Other Advertising (Yard Signs, Buttons, etc.) |
| C Contributions to Candidates & PAC's | P Postage |
| D Donations & Gifts | S Surveys & Polls |
| E Event Expenses | T Tickets (Events) |
| F Food & Refreshments | U Utilities |
| G General Operational Expenses | W Wages, Salaries, Benefits & Bonuses |
| L Literature, Brochures, Printing | Y Petition Circulators |
| M Management Services | Z Preparation & Production of Advertising |

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
10 / 19 / 11	1. Idaho Senior News, Inc. P.O. Box 44508 Boise, ID 83711-0	N	\$ 450.00
_ / _ / _	2.		\$ _____
_ / _ / _	3.		\$ _____
_ / _ / _	4.		\$ _____
_ / _ / _	5.		\$ _____
_ / _ / _	6.		\$ _____
_ / _ / _	7.		\$ _____
_ / _ / _	8.		\$ _____
_ / _ / _	9.		\$ _____
_ / _ / _	10.		\$ _____
Total This Page:			\$450.00

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

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

Name of Creditor from Schedule E:

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

Purpose Codes

- | | |
|--|---|
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) | N Newspaper & Other Periodical Advertising |
| B Broadcast Advertising (Radio, TV & Internet) | O Other Advertising (Yard Signs, Buttons, etc.) |
| C Contributions to Candidates & PAC's | P Postage |
| D Donations & Gifts | S Surveys & Polls |
| E Event Expenses | T Tickets (Events) |
| F Food & Refreshments | U Utilities |
| G General Operational Expenses | W Wages, Salaries, Benefits & Bonuses |
| I Interest Accrued & Finance Charges | Y Petition Circulators |
| L Literature, Brochures, Printing | Z Preparation & Production of Advertising |
| M Management Services | |

Date Incurred	Full Name, Mailing Address and Zip Code of Expenditure	Purpose Code	Amount
10 /19 /11	1. Idaho Senior News, In. P.O. Box 44508 Boise, ID 83711	N	\$ 450.00
/ /	2.		\$ _____
/ /	3.		\$ _____
/ /	4.		\$ _____
/ /	5.		\$ _____
/ /	6.		\$ _____
/ /	7.		\$ _____
/ /	8.		\$ _____
/ /	9.		\$ _____
Total This Page:			\$450.00

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



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

RECEIVED

C-2
Rev. 10/07

DEC 13 2011

CITY OF MERIDIAN
CITY CLERKS OFFICE

Section I

Name of Candidate or Political Committee and Chairperson John Shawcroft		Office Sought (if candidate) City Councilman	Seat (if any) 1
Mailing Address 1997 Kristen Way	City and Zip Meridian 83646	Home Phone 208-887-9513	Work Phone 208-697-6273
Name of Political Treasurer Veronica Shawcroft			
Mailing Address 1997 Kristen Way	City and Zip Meridian 83646	Home Phone 208-887-9513	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 10/24 / 2011 through 11/18 / 2011.

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

Annual Report

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	\$ _____
Line 2: Enter Beginning Cash Balance**	\$ 0	\$ XXXXXX
Line 3: Total Contributions (Enter amount from 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)	\$ 450.00	\$ 450.00
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ 0	\$ 0
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.

**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 the beginning cash on hand.

Section V

I, Veronica Shawcroft, hereby certify that the information in this
Name of Political Treasurer

report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

V Shawcroft

Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee:

		Total This Period
Contributions		
①	Unitemized Contributions (\$50 and less) # of Contributors _____	+ \$
②	Itemized Contributions (Total of all Schedule A sheets)	+ \$
③	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+ \$
④	Loans (Total of all New Loan amounts from Schedule D sheets)	+ \$
⑤	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	= \$0

Expenditures		
⑥	Unitemized Expenditures (\$25 and less) # of Expenditures _____	+ \$
⑦	Itemized Expenditures (Total of all Schedule B sheets)	+ \$
⑧	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$
⑨	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+ \$
⑩	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+ \$450.00
⑪	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	= \$450.00

Loans, Credit Cards and Debt		
⑫	Outstanding Balance from previous reporting period	+ \$
⑬	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+ \$
⑭	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+ \$
⑮	Subtotal	= \$
⑯	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	- \$
⑰	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	- \$450.00
⑱	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	= \$0.00

Pledged Contributions		
⑲	Unitemized Pledged Contributions (\$50 and less) # of Pledges _____	+ \$
⑳	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$
㉑	Total Pledged Contributions this period	= \$0

SCHEDULE E CREDIT CARDS and DEBT

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

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

Any creditor(s) with a balance(s) appearing on the last report must be listed below with the amount in the Previous Balance column. Any new debt should be listed in the New Debt column, including any accrued interest. If a payment was made on the debt, list it in the Repayments column. Note: Any debt that was repaid in full in a previous reporting period does not need to be listed. The Outstanding Balance column is the Previous Balance plus New Debt less any Repayments of Debt.

Name, Mailing Address and Zip Code of Creditor (Candidate, Individual or Business)	Previous Balance of debt at the end of the last reporting period	New Debt amount incurred during this reporting period	Repayments of Debt during this reporting period	Balance outstanding at the end of this reporting period
1. Chase P.O. Box 17199 Wilmington, DE 19850-7199	\$450.00	Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ 450.00	\$0.00
2.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
3.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
4.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
5.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
6.		Date: _____ Amount: _____ \$ _____	Date: _____ Amount: _____ \$ _____	
	Previous	Incurred	Repayments	Ending Balance

Previous Total: \$ 450.00

Incurred Total:

(Transfer the combined total of all incurred debt to the Detailed Summary, page 2 line 14)

\$ 0

Repayments Total:

(Transfer the combined total of all debt repayments to the Detailed Summary, page 2 line 10 & 17)

\$ 450.00

Ending Balance Total: \$ 0