

C-2
Rev. 7/97



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

Section I

Name of Candidate or Political Committee and Chairperson <u>MONTE PEARCE</u>		Office Sought (if candidate) <u>STATE REPRESENTATIVE 9</u>	District (if any)
Mailing Address <input type="checkbox"/> Check if address change. <u>2001 COUNTY LINE RD</u>	City and Zip <u>83655 NEWPLYMOUTH</u>	Home Phone <u>278-5408</u>	Work Phone <u>278-5408</u>
Name of Political Treasurer <u>RONALD B. GARNER</u>			
Mailing Address <input type="checkbox"/> Check if address change. <u>5255 SAND HOLLOW RD #A</u>	City and Zip <u>83655 NE PLYMOUTH</u>	Home Phone <u>278-3480</u>	Work Phone <u>SAME</u>

Section II

TYPE OF REPORT

Directions: To indicate the type of report being filed, fill in the appropriate **dates and** check the appropriate **box(es)**. See the instructional manual for reporting periods and due dates.

This report is for the period from JAN 1 2000 t h r o u g h MAY 1 7 2000

- | | | |
|--|---|--|
| <input checked="" type="checkbox"/> 7 Day Pre-Primary Report | <input type="checkbox"/> 7 Day he-General Report | <input type="checkbox"/> Quarterly (April 30)
(only filed by ballot measure committees) |
| <input type="checkbox"/> 30 Day Post-Primary Report | <input type="checkbox"/> 30 Day Post-General Report | <input type="checkbox"/> Quarterly (July 30)
(only filed by ballot measure committees) |
| <input type="checkbox"/> October 10 Pre-General Report | <input type="checkbox"/> Annual Report | |

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 had no contributions or expenditures during this reporting period, check the **box** next to the statement below, fill in the appropriate **dates** 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 from JAN 1 2000 through MAY 1 7 2000.

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 **POSTED**).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ <u>XXXXXX</u>	\$ <u>XXXXXX</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ _____	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ _____	\$ _____
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ _____	\$ _____
Line 5: Total Expenditures (Enter amount from page 2)	\$ _____	\$ _____
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ _____	\$ _____

*This same figure should be entered on line I of all reports filed this calendar year.
**You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period. Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Section V

CONTRIBUTIONS PLEDGED - INCURRED EXPENDITURES

Contributions Pledged during this reporting period but not yet received: None \$ _____ (see attached Schedule C-2A)
Incurred Expenditures during this reporting period but not yet paid: None \$ _____ (see attached Schedule C-2B)

Section VI

CERTIFICATION

Return This Report To:
Pete T. Cernarusa
Secretary of State
PO Box 83720
Boise ID 83720-0080
fax: (208) 334-2282

RONALD B. GARNER hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Ronald B. Garner
Signature of Political Treasurer