



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

NOV 29 PM 12:52

**Section I**

Name of Candidate or Political Committee and Chairperson <b>R Steve Smylie</b>		Office Sought (if candidate) <b>House Seat A</b>	District (if any) <b>15</b>
Mailing Address <b>2220 N Coolwater</b>	<input type="checkbox"/> Check if address change	City and Zip <b>Boise, ID 83713</b>	Home Phone <b>208-377-5281</b>
Name of Political Treasurer <b>Bradford D Hill</b>			
Mailing Address <b>4814 Riverfront Place</b>	<input type="checkbox"/> Check if address change	City and Zip <b>Garden City, ID 83714</b>	Work Phone <b>208-322-3845</b>
		Home Phone <b>208-853-4814</b>	Work Phone <b>208-855-4606</b>

**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 Oct / 18 / 2004 through Nov / 12 / 2004

- 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 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 \_\_\_\_\_ through \_\_\_\_\_

**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).

	<b>COLUMN I This Period</b>	<b>COLUMN II Calendar Year to Date</b>
Line 1: Cash on Hand January 1, This Year*	\$ XXXXXX	\$ 1,556.63
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 6,481.92	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ -3,500.00	\$ 14,374.19
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 2,981.92	\$ 15,930.92
Line 5: Total Expenditures (Enter amount from page 2)	\$ 220.87	\$ 13,169.77
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 2,761.05	\$ 2,761.05
Line 7: Outstanding Debt to Date	\$ 0.00	

\*This same figure should be entered on line 1 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**

**CERTIFICATION**

**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 Bradford D Hill, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

*Bradford D Hill*  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee R Steve Smylie	Report Covering the Period From <u>Oct / 18 / 04</u> to <u>Nov / 12 / 04</u>
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<b>UNITEMIZED CONTRIBUTIONS</b>	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>0</u>	Total Amount \$ <u>0.00</u>
<b>UNITEMIZED EXPENDITURES</b>	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>2</u>	Total Amount \$ <u>28.46</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ 0.00
Itemized Contributions (total all Schedule A sheets)	\$ -3,500.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ -3,500.00
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 28.46
Itemized Expenditures (total all Schedule B sheets)	\$ 192.41
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0.00
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 220.87
<u>1</u> Number of Schedule C-2B pages Attached	
<b>Incurred Expenditures</b>	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 0.00
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ 0.00
Subtotal	= \$ 0.00
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ 0.00
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 0.00
<u>1</u> Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	
Amount Pledged this Period	\$ 0.00

**SCHEDULE A**  
**ITEMIZED CONTRIBUTIONS**  
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee  
R Steve Smylie

		Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
11 / 2 / 04	1. Workcare Northwest 2404 Bank Drive Suite 302 Boise, ID 83705	\$ 50.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 50.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11 / 2 / 04	2. Advantage Workers Compensation Ins. Co. P O Box 571918 Salt Lake City, UT 84157-1918	\$ 50.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 50.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11 / 2 / 04	3. Dennis Bassford 4380 92nd Ave S.E. Mercer Island, WA 98040	\$ 200.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11 / 10 / 04	4. Idaho Soft Drink PAC 600 E Overland Meridian, ID 83642	\$ 200.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
11 / 12 / 04	5. Steve Smylie 2220 N Coolwater Boise, ID 83713	\$ _____	\$ _____	\$ -4,000.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ 0.00 <small>Calendar Year To Date</small>
_ / _ / _	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
_ / _ / _	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
_ / _ / _	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
_ / _ / _	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ 500.00	\$ 0.00	\$ -4,000.00
Total This Page (add columns A, B & C)				\$ -3,500.00

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

Name of Candidate or Committee  
R Steve Smylie

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10 / 31 / 04	1. Winco Meridian, Idaho 83642	\$ 87.13	\$ _____
<b>Purpose of Above Expenditure:</b> Hospitality Room			
11 / 12 / 04	2. DoubleTree Riverside Hotel 2900 Chinden Blvd Garden City, ID 83714	\$ 105.28	\$ _____
<b>Purpose of Above Expenditure:</b> Hospitality Room			
/ /	3.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	4.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	5.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	6.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
Subtotals of Columns A & B		\$ 192.41	\$ 0.00
Total This Page (add columns A & B)			\$ 192.41

**SCHEDULE C-2A  
CONTRIBUTIONS PLEDGED BUT NOT YET RECEIVED**

Name of Candidate or Committee R Steve Smylie	Report Covering the Period From <u>Oct / 18 / 04</u> to <u>Nov / 12 / 04</u>
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**Directions:** Complete this schedule if you were promised and agreed to accept a contribution during this reporting period but have not actually received the money, goods or services offered before the end of the reporting period. Do not include these entries on Schedule A until you actually receive the contribution.

<b>Line 1: Pledged Contributions of \$50.00 or Less This Period:</b> Total Number <u>0</u> Total Amount \$ <u>0.00</u>
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**Pledged Contributions of More Than \$50.00 This Period:**

Pledge For	Date of Pledge	Full Name, Mailing Address and Zip Code of Contributor/Lender	Amount Pledged
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	1.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	2.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	3.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	4.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	5.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	6.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	7.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	8.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	9.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	10.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	___/___/___	11.	

Line 2: Total Amount of Pledged Contributions of More Than \$50.00	\$ <u>0.00</u>
Line 3: Total Amount of Pledged Contributions of \$50.00 or Less (enter amount from line 1)	\$ <u>0.00</u>
Line 4: Total Amount of Pledged Contributions this Period (add lines 2 and 3) Also enter this total in Section V, page 1.	\$ <u>0.00</u>

**SCHEDULE C-2B**  
**EXPENDITURES INCURRED (Debts and Obligations) & PAYMENT MADE ON DEBT**

Name of Candidate or Committee R Steve Smylie	Report Covering the Period From <u>Oct / 18 / 04</u> to <u>Nov / 12 / 04</u>
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**Directions:** Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service or made a payment on debt. Do not include these entries on Schedule B.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period:	Total Number <u>0</u>	Total Amount \$ <u>0.00</u>
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**Expenditures Incurred (Debts and Obligations) or Payment Made on Debt of \$25.00 or More This Period:**

Full Name, Mailing Address and Zip Code or Creditor	Purpose of Expenditure
1.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	
2.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	
3.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	
4.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	
5.	
Outstanding Balance beginning this period.. \$ _____ Amount Incurred this period..... \$ _____ Date Incurred _____ Payment this period..... \$ _____ Date of Payment _____ Outstanding Balance..... \$ _____	

**Totals of this Page**

<b>Line 2: Amount Incurred This Period</b> (Carry forward to Page 2, Under Incurred Expenditures)	\$ <u>0.00</u>
<b>Line 3: Payment This Period</b> (Carry forward to Page 2, under Expenditures and Incurred Expenditures)	\$ <u>0.00</u>