



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

Section I

Name of Candidate or Political Committee and Chairperson <u>Welton E. Ward</u>		Office Sought (if candidate) <u>State Legislator</u>	District (if any) <u>District 132</u>
Mailing Address <input type="checkbox"/> Check if address change.	City and Zip	Home Phone	Work Phone
Name of Political Treasurer <u>Sandra P. Hess</u>		STATE OF IDAHO	
Mailing Address <input type="checkbox"/> Check if address change.	City and Zip	Home Phone	Work Phone
<u>222 West 700 North</u>	<u>Malad 83252</u>	<u>(208) 766-4348</u>	<u>(208) 766-4777</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 00/11/12000 through 07 / / 00

- | | | |
|--|---|---|
| <input type="checkbox"/> \$7 Day Pre-Primary Report | <input type="checkbox"/> 7 Day Pre-General Report | <input type="checkbox"/> CI 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, till 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).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ <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)	\$ <u>670.00</u>	\$ _____
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 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

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)

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

Section VI

CERTIFICATION

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

Sandra P. Hess
Signature of Political Treasurer

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

I ' " " ' /

Name of Candidate or Committee

		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
5/5/00	1. Jim Jones & Associates Attorneys at Law 1275 Shoreline Lane Boise, Idaho 83702-6870	\$ 250.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
5/8/00	2. Hess Pumice Products, Inc 100 Hess Drive P.O. Box 209 Malad, Idaho 83252	\$ 300.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
5/3/00	3. Bill Hubbard 6470 North Arbon Valley Road Holbrook, Idaho 83243	\$ 50.00	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
___/___/___	4.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
___/___/___	5.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
___/___/___	6.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
___/___/___	7.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
___/___/___	8.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
___/___/___	9.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
___/___/___	10.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
Subtotals of Columns A, B & C		\$ 600.00	\$	\$
Total This Page (add columns A, B & C)				\$ 600.00

DETAILED SUMMARY PAGE

Name of Candidate or Committee <i>Wilton F. Ward</i>	Report Covering the Period From <i>11/01/2000</i> to <i>05/07/2000</i>
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UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number <u> 3 </u>	Total Amount \$ <u> 70.00 </u>
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UNITEMIZED EXPENDITURES

Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total Number <u> — </u>	Total Amount \$ <u> — </u>
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	Total This Period
<u> 3 </u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u> 70.00 </u>
Itemized Contributions (total all Schedule A sheets)	\$ <u> 600.00 </u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u> 670.00 </u>
<u> 0 </u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ <u> — </u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u> — </u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u> — </u>