



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

**Section I**

Name of Candidate or Political Committee and Chairperson <b>COMMITTEE TO ELECT ELAILE SMITH</b>		Office Sought (if candidate) <b>STATE REPRESENTATIVE #30B</b>	District (if any)
Mailing Address <input type="checkbox"/> Check if address change. <b>3759 HERON</b>	City and Zip <b>POCATELLO 83201</b>	Home Phone <b>208-237-1462</b>	Work Phone <b>208-235-3231</b>
Name of Political Treasurer <b>ALAN E. STANEK</b>			
Mailing Address <input type="checkbox"/> Check if address change. <b>1352 E. LEWIS STREET</b>	City and Zip <b>POCATELLO 83201</b>	Home Phone <b>208-232-1338</b>	Work Phone <b>SAME</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 10 / 21 / 02 through 11 / 15 / 02

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report      | <input type="checkbox"/> 7 Day Pre-General Report              | <input type="checkbox"/> Quarterly (April 30)<br>(only filed by ballot measure committees) |
| <input type="checkbox"/> 30 Day Post-Primary Report    | <input checked="" type="checkbox"/> 30 Day Post-General Report | <input type="checkbox"/> Quarterly (July 30)<br>(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 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ 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*	\$ XXXXXX	\$ 0
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 6,009.17	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 2,209.04	\$ 11,856.02
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 8,218.21	\$ 11,856.02
Line 5: Total Expenditures (Enter amount from page 2)	\$ 3,637.38	\$ 7,275.19
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 4,580.83	\$ 4,580.83

\*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  \$ 0 (see attached Schedule C-2A)  
Incurred Expenditures during this reporting period but not yet paid:  None  \$ 0 (see attached Schedule C-2B)

**Section VI**

**CERTIFICATION**

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

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

*Alan E. Stanek*  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee

COMMITTEE TO ELECT ELAINE SMITH

Report Covering the Period

From 10/21/02 to 11/15/02

### UNITEMIZED CONTRIBUTIONS

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

Total  
Number 14

Total  
Amount \$ 450.00

### UNITEMIZED EXPENDITURES

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

Total  
Number 0

Total  
Amount \$ 0

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>450.00</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>1,759.04</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>2,209.04</u>
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>0</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>3,637.38</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>3,637.38</u>

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

Name of Candidate or Committee  
COMMITTEE TO ELECT ELAINE SMITH

		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
<u>10/24/02</u>	1. ELAINE SMITH 3759 HERON POCATELLO, ID 83201	\$ _____	\$ _____	\$ <u>328.73</u>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____	\$ _____	\$ <u>962.75</u>
		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
<u>10/25/02</u>	2. ELAINE SMITH 3759 HERON POCATELLO, ID 83201	\$ _____	\$ _____	\$ <u>380.31</u>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____	\$ _____	\$ <u>1,343.06</u>
		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
<u>10/23/02</u>	3. KEN ROBISON FOR REP. 1119 N. 12 <sup>th</sup> BOISE, ID 83702	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u>	\$ _____	\$ _____
		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
<u>10/28/02</u>	4. RESTORE REPRESENTATIVE GOVERNMENT BOX 796 KETCHUM, ID 83340	\$ <u>150.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>900.00</u>	\$ _____	\$ _____
		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
<u>10/29/02</u>	5. MILLER BREWING CO. 3939 HIGHLAND BLVD. MILWAUKEE, WI 53201	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u>	\$ _____	\$ _____
		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
<u>10/31/02</u>	6. JOHN LOOZE 157 S. LINCOLN POCATELLO, ID 83204	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u>	\$ _____	\$ _____
		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
<u>11/01/02</u>	7. IDAHO PETROLEUM MARKETERS & CONVENIENCE STORE ASSOC. P.O. BOX 984 BOISE, ID 83706-0984	\$ <u>100.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>100.00</u>	\$ _____	\$ _____
		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
<u>11/06/02</u>	8. HEWLETT PACKARD P.O. BOX 2810 COLORADO SPRINGS, CO 80901-2810	\$ <u>500.00</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ <u>500.00</u>	\$ _____	\$ _____
		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
<u>   /   /   </u>	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____	\$ _____	\$ _____
		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
<u>   /   /   </u>	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		\$ <u>1,050.00</u>	\$ <u>0</u>	\$ <u>709.04</u>
Total This Page (add columns A, B & C)				\$ <u>1,759.04</u>

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

Name of Candidate or Committee  
**COMMITTEE TO ELECT ELAINE SMITH**

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
10/28/02	1. IDAHO WIRELESS CORP. 436 N. MAIN POCATELLO, ID 83204	\$ 788.80	\$ _____
Purpose of Above Expenditure: RADIO ADS ON KZBQ + KORR 104.4			
10/28/02	2. CLEAR CHANNEL COMMUNICATIONS 259 E. CENTER POCATELLO, ID 83201	\$ 400.00	\$ _____
Purpose of Above Expenditure: RADIO ADS ON KPYK 94.9			
10/28/02	3. SIMMONS MEDIA GROUP P.O. BOX 699 BLACKFOOT, ID 83221	\$ 405.00	\$ _____
Purpose of Above Expenditure: RADIO ADS 10/30 to 11/05 KLCE			
11/05/02	4. IDAHO STATE JOURNAL 305 S. ARTHUR AVE POCATELLO, ID 83204	\$ 91.62	\$ _____
Purpose of Above Expenditure: PRINT ADS in IST 11/8 -			
11/13/02	5. KACEE GARDNER 735 E. BENTON POCATELLO, ID 83201	\$ 750.00	\$ _____
Purpose of Above Expenditure: CAMPAIGN MANAGER EXPENSE			
11/13/02	6. ELAINE SMITH 3759 HERON POCATELLO, ID 83201	\$ 1,161.96	\$ _____
Purpose of Above Expenditure:			
11/13/02	7. COMMITTEE TO ELECT DONNA BOE c/o MIKE ROWE TREASURER 208 S. 13th AVE. POCATELLO, ID 83201	\$ 40.00	\$ _____
Purpose of Above Expenditure: VOLUNTEER DINNER EXPENSE/REIMBURSEMENT			
11/13/02	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
11/13/02	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 3,637.38	\$ _____
Total This Page (add columns A & B)			\$ 3,637.38

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

Name of Candidate or Committee <b>COMMITTEE TO ELECT ELAINE SMITH</b>	Report Covering the Period From <b>10/21/02</b> to <b>11/15/02</b>
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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</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

\$ 0

Line 3: Total Amount of Pledged Contributions of \$50.00 or Less (enter amount from line 1)

\$ 0

Line 4: Total Amount of Pledged Contributions this Period (add lines 2 and 3) Also enter this total in Section V, page 1.

\$ 0

**SCHEDULE C-2B  
EXPENDITURES INCURRED BUT NOT YET PAID**

Name of Candidate or Committee <b>COMMITTEE TO ELECT ELAINE SMITH</b>	Report Covering the Period From <b>10/21/02</b> to <b>11/15/02</b>
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**Directions:** Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service, but did not make payment before the end of the reporting period. Do not include these entries on Schedule B until you actually make payment.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period:	Total Number <u>0</u>	Total Amount \$ <u>0</u>
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**Incurred Expenditures of \$25.00 or More This Period:**

Date Incurred	Full Name, Mailing Address and Zip Code of Recipient	Amount Incurred
1. / /		
<b>Purpose of Above Expenditure:</b>		
2. / /		
<b>Purpose of Above Expenditure:</b>		
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>		
7. / /		
<b>Purpose of Above Expenditure:</b>		
8. / /		
<b>Purpose of Above Expenditure:</b>		

Line 2: Total Amount of Incurred Expenditures \$25.00 or more	\$ <u>0</u>
Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1)	\$ <u>0</u>
Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Section V, page 1.	\$ <u>0</u>