



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

Section I

Name of Candidate or Political Committee and Chairperson MONIE L. SMITH		Office Sought (if candidate) HOUSE OCT-4	District (if any) AD-06B
Mailing Address <input type="checkbox"/> Check if address change. 559 E. 300 S.	City and Zip Jerome 83338	Home Phone 324-6554	Work Phone 735-2955
Name of Political Treasurer MICHAEL G. JOHNSON			
Mailing Address <input type="checkbox"/> Check if address change. 559 E. 300 S.	City and Zip Jerome 83338	Home Phone 324-6554	Work Phone 735-2023

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 _____ / _____ / _____ through 10 / 05 / 00

- | | | |
|---|---|--|
| <input type="checkbox"/> 7 Day Pre-Primary Report | <input type="checkbox"/> 7 Day Pre-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 checked="" type="checkbox"/> October 10 Pre-General Report | <input type="checkbox"/> Annual Report | |

Is this Report an amendment? 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	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ _____	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ _____	\$ 200
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ _____	\$ 200 (* returned)
Line 5: Total Expenditures (Enter amount from page 2)	\$ _____	\$ 0
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ _____	\$ 0

*This same figure should be entered on line 1 of all reports filed this calendar year. *** returned to St. Dem Party; see attached letter.**
 **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

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

Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee MONIE C. SMITH	Report Covering the Period From ___ / ___ / ___ to 10 / 5 / 00
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number _____	Total Amount \$ _____

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number _____	Total Amount \$ _____

	Total This Period
____ Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$
Itemized Contributions (total all Schedule A sheets)	\$
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 200.00 *
<i>Total Contributions Kept</i>	<i>0</i>
____ Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 00

** This contribution from the State Democratic Party was voided and returned. See attached letter.*

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

Name of Candidate or Committee
MONIE L. 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
6/12/00	1. House Democrats Boise, ID 83701 * check not cashed,	\$ 200.00*	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
/ /	2. returned on 9/29/00	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year to Date
/ /	3.	\$	\$	\$
<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		\$ 200.00	\$	\$
Total This Page (add columns A, B & C)		\$ 200.00	\$	\$