

c-2 Rev. 7/97



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson, Office Sought, District, Mailing Address, City and Zip, Home Phone, Work Phone, Name of Political Treasurer, and their respective addresses and phone numbers.

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 06/05 / 07 / 0027 through / 00 ...

- Checkboxes for report types: 7 Day Pre-Primary Report, 7 Day Pre-General Report, Quarterly (April 30), 30 Day Post-Primary Report, 30 Day Post-General Report, Quarterly (July 30), October 10 Pre-General Report, Annual Report.

Is this Report an amendment? [ ] Yes [X] No Is this a Termination Report? [ ] Yes [X] 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).

Table with 3 columns: Line description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand, Total Contributions, Subtotal, Total Expenditures, and Cash Balance at Close of Period.

\*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

CON-J-H I HI TIONS PLEDGED - INCURRED EXPENDITURES

Contributions Pledged during this reporting period but not yet received: [X] None [ ] \$ 0.00 (see attached Schedule C-2A) Incurred Expenditures during this reporting period but not yet paid: [ ] None [X] \$ 137.46 (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, Scott B. 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 (Handwritten signature)

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <u>Scott B. Johnson</u>	Report Covering the Period From <u>05/01/00</u> to <u>06/22/00</u>
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### UNITEMIZED CONTRIBUTIONS

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

Total Number 1      Total Amount \$ 25.00

### TJNTTETVTTZEI EXPENDITURES

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

Total Number 0      Total Amount \$ 0.00

	Total This Period
<b>Number of Schedule A pages Attached</b>	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>25.00</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>100.06</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>125.00</u>
<b>Number of Schedule B pages Attached</b>	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>0.00</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>174.00</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>174.00</u>

# SCHEDULE A

## ITEMIZED CONTRIBUTIONS

of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee Scott B. Johnson

		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)	Lonns
05/23/00	1. Scott B. Johnson 7 West Armo Rd Armo, Idaho 83214	\$ _____	\$ _____	\$ 100.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ 875.45 <small>Calendar Year to Date</small>
_ / _ / _	2.	\$ _____	\$ _____	\$ _____
<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>
_ / _ / _	3.	\$ _____	\$ _____	\$ _____
<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>
_ / _ / _	4.	\$ _____	\$ _____	\$ _____
<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>
_ / _ / _	5.	\$ _____	\$ _____	\$ _____
<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>
_ / _ / _	6.	\$ _____	\$ _____	\$ _____
<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>
_ / _ / _	7.	\$ _____	\$ _____	\$ _____
<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>
_ / _ / _	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>
_ / _ / _	10.	\$ _____	\$ _____	\$ _____
<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>
<b>Subtotals of Columns A, B &amp; C</b>		\$ _____	\$ _____	\$ 100.00
<b>Total This Page (add columns A, B &amp; C)</b>				\$ 100.00

## SCHEDULE B ITEMIZED EXPENDITURES

of Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee: Scott B Johnson

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-munelary)
05/24/00	1. Caribou County Sun Soda Springs, Idaho	\$ 99.00	\$
Purpose of Above Expenditure: <u>Newspaper Ads</u>			
05/24/00	2. Scott B. Johnson 7. W. Armo Rd Armo 83214	\$ 75.00	\$
Purpose of Above Expenditure: <u>Reimbursement for Gasoline</u>			
/ /	3.	\$	\$
Purpose of Above Expenditure:			
/ /	4.	\$	\$
Purpose of Above Expenditure:			
/ /	5.	\$	\$
Purpose of Above Expenditure:			
/ /	6.	\$	\$
Purpose of Above Expenditure:			
/ /	7.	\$	\$
Purpose of Above Expenditure:			
/ /	8.	\$	\$
Purpose of Above Expenditure:			
/ /	9.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 174.00	\$ 0.00
Total This Page (add columns A & B)			\$ 174.00

### SCZIEDULE C-2B EXPENDITURES INCURRED BUT NOT YET PAID

Name of Candidate or Committee <b>Scott B. Johnson</b>	Report Covering the Period From <u>05/01/00</u> to <u>06/22/00</u>
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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.

<b>Line 1: Incurred Expenditures of Less Than \$25.00 This Period:</b>	Total Number <u>0</u>	Total Amount \$ <u>0.00</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
<u>06/01/00</u>	1.	<u>the Preston Citizen 77 S. State Preston, Idaho 83263</u>	<u>137.46</u>
<b>Purpose of Above Expenditure:</b> <u>Newspaper Ads</u>			
/ /	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 \$ 137.46  
 Line 3: Total Amount of Incurred Expenditures Under \$25.00 (enter amount from line 1) \$ 0.00  
 Line 4: Total Amount of Incurred Expenditures this Period (add lines 2 and 3) Also enter this total in Section V, page 1. \$ 137.46