



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE
(Please Print or Type)

Section I

Name of Candidate or Political Committee and Chairperson BRUCE NEWCOMB		Office Sought (if candidate) STATE REPRESENTATIVE	District (if any) 24
Mailing Address 1676 MONROE	<input type="checkbox"/> Check if address change	City and Zip BURLEY 83318	Home Phone 678-3738
Name of Political Treasurer CURTIS POPE		Home Phone 654-2202	Work Phone 678-3027
Mailing Address PO BOX 608	<input type="checkbox"/> Check if address change	City and Zip BURLEY 83318	Home Phone 654-2202
		Work Phone 678-3027	

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 05h / 08 / 00 u g h / 08 / 00

- 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
- Quarterly (April 30)
(only filed by ballot measure committees)
- Quarterly (July 30)
(only filed by ballot measure committees)

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*	\$ <u>xxxxxx</u>	\$ <u>2634.26</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>2334.26</u>	\$ <u>xxxxxx</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>4000.00</u>	\$ <u>4500.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>6334.26</u>	\$ <u>7134.26</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>180.82</u>	\$ <u>980.82</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>6153.44</u>	\$ <u>6153.44</u>

*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 OS _____ (see attached Schedule C-2 A)

Incurred Expenditures during this reporting period but not yet paid: None \$ _____ (see attached Schedule C-23)

Return This Report To:
Pete T. Cenarrusa
Secretary of State
PO Box 83720
Boise ID 837204080
fax: (208) 334-2282

Section VI

CERTIFICATION

I CURTIS POPE, hereby certify that the information
(name of Political Treasurer)
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 _____

Report Covering the Period

From _____ to _____

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 \$ _____;82

	Total This Period
Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (SSO and less) from top of page	is _____
Itemized Contributions (total all Schedule A sheets)	\$ 4,000.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 4,000.00
Number of Schedule B pages Attached	
Expenditures	82
Unitemized Expenditures (less than \$25) from top of page	\$ 180.00
Itemized Expenditures (total all Schedule B sheets)	\$ 180.82
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ _____

ITEMIZED CONTRIBUTIONS

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

Name of Candidate or Committee
BRUCE NEWCOMB

		Column A	Column B	Column C
Date/ Receipt For	Full Same. Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
5 19 00	1 MICRON PAC 8000 FEDERAL WAY PO BOX 6 BOISE, ID 83707	\$ 1000.00	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 1000.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
5 19 00	2 U.S. WEST PAC 999 MAIN 11th Floor BOISE, ID 83702	\$ 1000.00	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 1000.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
5 19 00	3 IDAHO MEDICAL PAC 305 W JEFFERSON BOISE, ID 83702	\$ 200.00	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
5 22 00	4 SIMPLOT PAC PO BOX 27 BOISE, ID 83707	\$ 1000.00	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 1000.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
5 22 00	5 I. C. U. L. A. C. PO BOX 5158 BOISE, ID 83705	\$ 200.00	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
5 /22 / 00	6 STEIN DISTRIBUTING 601 N PHILLIPI ST. PO Box 9367 BOISE, IDN 83707	\$ 100.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ 100.00 <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year to Date</small>
5 26 00	7 IBWDA PAC PO BOX 863 BOISE, ID 83701	\$ 500.00	\$ _____	\$ _____
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 500.00 <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>
Subtotals of Columns A, B & C		\$ 4,000.00	\$ _____	\$ _____
Total This Page (add columns A, B & C)				\$ 4,000.00

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

Name of Candidate or Committee <p align="center">BRUCE NEWCOMB</p>

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
5 8 00	MINI - CASSIA GOP BURLEY, ID	\$ 180.00	\$ _____
Purpose of Above Expenditure: CONTRIBUTION			
		\$ _____	\$ _____
Purpose of Above Expenditure:			
		\$ _____	\$ _____
Purpose of Above Expenditure:			
		\$ _____	\$ _____
Purpose of Above Expenditure:			
		\$ _____	\$ _____
Purpose of Above Expenditure:			
		\$ _____	\$ _____
Purpose of Above Expenditure:			
		\$ _____	\$ _____
Purpose of Above Expenditure:			
		\$ _____	\$ _____
Purpose of Above Expenditure:			
		\$ _____	\$ _____
Purpose of Above Expenditure:			
		\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 180.00	\$ _____
Total This Page (add columns A & B)			\$ 180.00