



CLEMENTS, BROWN & MCNIC  
CAMPAIGN FINANCIAL DISCLOSURE REPORT  
SUMMARY PAGE  
(Please Print or Type)

Section I

Name of Candidate or Political Committee and Chairperson Joe Stegner		Office Sought (if candidate) State Senate	District (if any) 6
Mailing Address 2 16 Prospect Blvd	<input type="checkbox"/> Check if address change.	City and zip Lewiston 8350 1	Home Phone 743-3032
Name of Political Treasurer Eric K. Peterson			Work Phone 798-8004
Mailing Address P.O. Box 1510	<input type="checkbox"/> Check if address change.	City and Zip Lewiston 8350 1	Home Phone 746-9050
			Work Phone 743-653 8

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 01 / 01 / 00 t h r o u g h 05 / 07 / 00

- 7 Day Pre-Primary Report
- 7 Day Pre-General Report
- Quarterly (April 30)  
(only filed by ballot measure committees)
- 30 Day Post-Primary Report
- 30 Day Post-General Report
- Quarterly (July 30)  
(only filed by ballot measure committees)
- October 10 Pre-General Report
- 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*	\$ <u>XXXXXX</u>	\$ <u>1,750.00</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>1,750.00</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>1,010.00</u>	\$ <u>1,010.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>2,760.00</u>	\$ <u>2,760.00</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>4.84</u>	\$ <u>4.84</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>2,755.16</u>	\$ <u>2,755.16</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  \$ \_\_\_\_\_ (see attached Schedule C-1A)

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

Section VI

CERTIFICATION

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

I Eric K. Peterson  
(name of Political Treasurer)  
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 Joe Stegner	Report Covering the Period From 01 / 01 / 00 to 05 / 07 / 00
---	---

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

Total Number 0                      Total Amount \$ 0

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

Total Number 0                      Total Amount \$ 0

	Total This Period
<b>Number of Schedule A pages Attached</b>	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ 0
Itemized Contributions (total all Schedule A sheets)	\$ 1,010.00
<b>Total Contributions (also enter this figure on page 1, Section IV, line 3)</b>	\$ 1,010.00
<b>Number of Schedule B pages Attached</b>	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 0
Itemized Expenditures (total all Schedule B sheets)	\$ 4.84
<b>Total Expenditures (also enter this figure on page 1, Section IV, line 5)</b>	\$ 4.84

SCHEDULE A

**ITEMIZED CONTRIBUTIONS**  
of more than Fifty Dollars (\$50.00) thii period

Name of Candidate or Committee  
**Joe Stec nev**

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A Cash or Check	Column B In-Kind (nun-monetary)	Column c Loans
01 / 10 / 00	National Association of Chain Drug Stores P.O. Box 1417-D49 Alexandria, VA 223 13	\$ 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>
04 / 18 / 00	Idaho Automobile Dealers Assn. Autopac 4980 West State Street Boise, ID 83703	\$ 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>
05 / 05 / 00	Tax Fairness Pac 1275 Shoreline Lane Boise, Idaho 83702	\$ 250.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 250.00 <small>Calendar Year To Date</small>	\$ - - <small>Calendar Year To Date</small>	\$ - - <small>Calendar Year To Date</small>
05 / 07 / 00	Idaho Medical Political Action Committee 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>
04 / 25 / 00	Glen R. Black 10200 West Emerald Boise, ID 83704	\$	\$ 260.00	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ - - <small>Calendar Year To Date</small>	\$ 260.00 <small>Calendar Year To Date</small>	\$ - - <small>Calendar Year To Date</small>
____ / ____ / ____		\$	\$	\$
<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>
____ / ____ / ____		\$	\$	\$
<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>
____ / ____ / ____		\$	\$	\$
<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>
____ / ____ / ____		\$	\$	\$
<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>
____ / ____ / ____		\$	\$	\$
<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		\$ 750.00	\$ 260.00	\$
Total This Page (odd columns A, B & C)				\$ 1,010.00

# SCHEDULE B

## ITEMIZED EXPENDITURES

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

Name of Candidate or Committee  
Joe Stegner

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
01 / 28 / 00	Twin River National Bank P.O. Box 1324 Lewiston, ID 8350 1	\$ 4.84 - -	\$ _____
Purpose of Above Expenditure: Deposit slips			
____ / ____ / ____	2. _____	\$ _____	\$ _____
Purpose of Above Expenditure:			
____ / ____ / ____	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		\$ 4.84	\$ _____
Total This Page (add columns A & B)			\$ 4.84