

CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

| Section I | | (1 | icase i init of 13 | (pc) | | |
|---|------------------------|--|--|---|------------------------------|----------------------------|
| Name of Candidate or Political Co | ommittee and Chairpers | son | | - | Office Sought (if candidate) | District (if any) |
| Judge Michae | y 1 Mc LAU | whlin. | | | District Indas | <1TH |
| Mailing Address | ☐ Check if address of | ا | ty and Zip | | Home Phone | Work Phone |
| 200 W. FROM | + 3 | T | 5075.C. 1D | 83 7 0 | 975-0956 | 387-7556 |
| Name of Political Treasurer | | | | | | |
| Mailing Address | ☐ Check if address | change C: | ty and Zip | | TT M | *** 1 *** |
| i t | | t 7/21 1 | ty and Zip Z | | Home Phone | Work Phone |
| Section II | ustead # | , ((2)) | 10154 IT | 53713 | 321-7919 | 1387 7552 |
| | | | YPE OF REPO | | | |
| 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 <u>C\ / C\ / 2(\) A</u> through <u>D\ 5 / 2 / 200</u> 2 | | | | | | |
| / / / / / / / / / / / / / / / / / / / | it is for the period | <u></u> | <u> </u> | | | 7002 |
| 7 Day Pre-Primar | y Report | ☐ 7 Day | Pre-General Re | port | ☐ Quarterly (April 30) | |
| | | | | (only filed by ballot measure committees) | | |
| ☐ 30 Day Post-Prim | ary Report | □ 30 Da | y Post-General 1 | Report | Ougadoules (Index 20) | o >> |
| ☐ October 10 Pre-G | | | Quarterly (July 30) (only filed by ballot measure committees) | | | |
| | • | | ar resport | | خذ | = |
| Is this Report a | n amendment? I | □Yes 🗖 1 | Vo | Is this a 7 | Termination Report? 🗖 | Yes No |
| Section III STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES | | | | | | |
| Section III | SIATEMEN | I OF NO C | ONIKIBUTIO | NS OR E | APENDITUKES 5 | - |
| Directions: If you had no co | ontributions or exp | enditures du | ring this reporti | ng period, | check the box next to the | statement below, fill in |
| the appropriate dates and sig | gn this report. Be s | sure to carry | forward the app | ropriate " | Calendar Year to Dat 🗗 🗓 | gures in Column II, |
| Section IV. | that I have receive | السيادة والمالة | | | | 7 . |
| i hereby certify | from () | a no contrit | utions and nave | made no | expenditures during this r | eporting period |
| | 110111 <u>O 1</u> | | Market Control of the | | 12/2007 | |
| Section IV | | | SUMMARY | | | |
| To reach your Calendar Yea | | | | _ | | COLUMN II |
| figures to the Column II fig | ures of your previo | us report (e | xcept on line 6). | 1 | his Period Calei | ndar Year to Date |
| Line 1: Cash on Hand January 1, This Year* \$ XXXXXX \$ | | | | | | |
| | | | | | | XXXXXX |
| Line 3: Total Contributions (Enter amount from page 2) \$ () \$ | | | | | | |
| Line 4: Subtotal (Add lines 1, 2 and 3) | | | | | | |
| Line 5: Total Expenditures (Enter amount from page 2) | | | | | | |
| Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** \$ () | | | | | | |
| | | | | | | |
| *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. | | | | | | |
| | | | | | | ii on nana. |
| Section V | CONTRIBUT | TIONS PLI | EDGED - INCU | RRED EX | KPENDITURES | |
| Contributions Pledged d | luring this reporting | g period but | not yet received | : ' 15/N or | ie □\$(so | ee attached Schedule C-2A) |
| Incurred Expenditures | during this reportin | g period but | not vet paid: | Nor | ne □\$ (so | ee attached Schedule C-2B) |
| • | | O I · · · · · · · · · · · · · · · · · · · | , , , , | | (0. | ov anadioa Bonodale C 2D) |
| | Section VI | | CF | RTIFICA | TION | |
| Return This Report To: | 1 | _ | ÇE. | MITTICA | 13014 | |
| Pete T. Cenarrusa | 1 | JAURA | _WAZK | ER | , hereby certify | that the information |
| Secretary of State | in this | report is a | name of Political Treasurer true, complete ar | d correct | Campaign Financial Disc | |
| PO Box 83720 Boise ID 83720-0080 | | | , | | XA \ | report to |
| Boise ID 83720-0080 required by law. fax: (208) 334-2282 | | | | | | |
| | | _ | Signature | n of bark | cal Treasurer | |
| | I | | Signatur | e of bound | lui siva surer | |
| | | | | | | |