C-2 Rev. 7/97



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section I					
Name of Candidate or Political Con	mmittee and Chairperso	n (11115)	17	e Sought (if candidate)	District (if any)
Mailing Address	Check if address ch	1/2' - '- 6/-		e Phone	Work Phone
Name of Political Treasuren	714	DOBE DO	2/02	NIT	MA
LEA AL	aus	>	_	<u> </u>	
Mailing Address	☐ Check if address ch	nange. City and Zip	Home	e Phone	Work Phone
TO DOX 3	014	IPVISE 0:	3 /0 3 ,	////	1///
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 $10/2$ $10/2$ through $1/2$					
☐ 7 Day Pre-Primary	•	☐ 7 Day Pre-General Rep	(only	uarterly (April 30) filed by ballot mea	sure committees)
☐ 30 Day Post-Prima	ary Report	30 Day Post-General Re	eport	uarterly (July 30)	
☐ October 10 Pre-Go	•	☐ Annual Report		filed by ballot mea	sure committees)
Is this Report ar	n amendment?	l Yes No I	s this a Termi	nation Report?	Yes X No
Section III	STATEMENT	OF NO CONTRIBUTION	S OR EXPE	NDITURES	
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. If I hereby certify that I have received no contributions and have made no expenditures during this reporting period from 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Section IV		CHIMIMADY			DOCTED
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