C-2 Rev. 7/97



## CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

(Please Print or Type)

| 02 OCT 20 | AH IN: I- |
|-----------|-----------|
|-----------|-----------|

| Section 1   |  |   |   | and to kille.  |  |
|---|--|---|---|--|--|
| Name of Candidate or Political Co   |  |   | Office Sought (if candidate   |  |  |
| ZEXTUDIVE 91.   | Wilsen_  |   | SIMAL   | 677  |  |
| Mailing Address P.O. BOX 83   | Check if address change.   | City and Zip  | 366 645,4748  | Wark Phone OF REAL   |  |
| Name of Political Treasurer   | Vike_  | 0   |   |  |  |
| Mailing Address   | ☐ Check if address change.   | City and Zip  | Home Phone  | Work Phone   |  |
| 3 Am  |  |   |   | i l  |  |
| Section II  |  | TYPE OF REPOR                                       | -   |  |  |
| Directions: To indicate the instructional manual for report                               | type of report being filed, orting periods and due dat t is for the period from  | fill in the appropriate of                          | fates and check the appropriate through 18 18-9                                 | box(es). Soc the   |  |
| ☐ 7 Day Pre-Primar  |  |   |   | ☐ Quarterly (April 30) (only filed by ballot measure committees) |  |
| ☐ 30 Day Post-Prim  |  |   |   | ,  |  |
| ☐ October 10 Pre-G  |  |   |   | (only filed by ballot measure committees)                        |  |
| ls 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 co<br>the appropriate dates and sig<br>Section IV.              | ontributions or expenditure to the sure to | es during this reporting<br>carry forward the uppro | period, check the box next to to<br>priate "Calendar Year to Date"              | he statement below, fill in figures in Column II,                |  |
|   | that I have received no co<br>from <u>/6</u> //6   | ntributions and have m                              | ade no expenditures during this   | reporting period   |  |
| Section IV  |  | SUMMARY   |   |  |  |
| To reach your Calendar Yea figures to the Column II figures                               |  |   | COLUMN I<br>This Period Cal   | COLUMN II<br>lendar Year to Date                                 |  |
| Line 1: Cash on Hand January 1, This Year* \$ XXXXXX \$                                   |  |   |   |  |  |
| Line 2: Enter Cash Balance at Close of Last Reporting Period**  \$ XXXXXX                 |  |   |   |  |  |
| Line 3: Total Contributions   |  | •   | s A   | <del>-</del>   |  |
| Line 4: Subtotal (Add lines   | 1, 2 and 3)  | •   | s A s   | <del>Q</del>   |  |
| 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<br>**You must report the cash<br>Note that the closing cash b | on hand at both the begins   | ning of the reporting pe                            | r year.<br>riod and the close of the report<br>n the next report as beginning o | ing period.<br>ash on hand.                                      |  |
| Section V   | CONTRIBUTIONS  | PLEDGED - INCUR                                     | RED EXPENDITURES  |  |  |
| Contributions Pledged d   | uring this reporting period  | but not yet received:                               | <b>€</b> None □\$   | (see attached Schedule C-2A)                                     |  |
| Incurred Expenditures   | during this reporting period   | d but not yet paid:                                 | DiNone □\$  | (see attached Schedule C-2B)                                     |  |
|   | Section VI   | CER   | TIFICATION  |  |  |
| Return This Report To:  | - FAA  | losas de la/  | 1 ca  |  |  |
| Pete T. Cenarrusa   | hereby certify that the information  |   |   |  |  |
| Secretary of State PO Box 83720   | in this report is a true, complete and correct Campaign Financial Disclosure Report as   |   |   |  |  |
| Boise ID 83720-0080<br>fax: (208) 334-2282  | required by law. Author & Wille  |   |   |  |  |
|   | Signature of Political Treasurer   |   |   |  |  |

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