

## CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

| Section I  |  |   |  |  |
|--|--|---|--|--|
| Name of Candidate or Political Co  | mmittee and Chairperson  |   | Office Sought (if candidate)   |  |
| Nathan W. F  | The Check if address change.   | Tay   | Dist. Judge  | 5 th   |
| Mailing Address 1403 Bitter  | Us Check if address change.  | City and Zip  | Home Phone   | Work Phone   |
| Name of Political Treasurer  | root Dr.   | TWIN Falls 83   | 301 735-2143   | 736-4180   |
| Kay Hige   | •  |   |  |  |
| Mailing Address  | ☐ Check if address change.   | City and Zip  | Home Phone   | Work Phone   |
| 1403 Bitterro  | at Dr  | TWIN Falls 833  | 301 735-2143   | 733-4229   |
| Section II   |  | TYPE OF REPORT  |  | 1700 7   |
| instructional manual for rep-  | orting periods and due date  | fill in the appropriate da  | ates and check the appropriate b   |  |
| This repor   | t is for the period from   | 1 / / 02  | _ through <u>5 / /2 /</u>  | 02   |
| 7 Day Pre-Primar   | y Report □ 7   | Day Pre-General Repor   | rt   | asure committees)  |
| ☐ 30 Day Post-Primary Report ☐ 30  |  | 0 Day Post-General Rep  |  | · 😘  |
| ☐ October 10 Pre-G   | eneral Report  | nnual Report  | (only filed by ballot me   | <b>*</b>   |
| Is this Report as  | n amendment?   | □ No Is 1   | this a Termination Report?   | Yes TNo  |
| Section III  | STATEMENT OF N   | O CONTRIBUTIONS   | OR EXPENDITURES  | <u> </u>   |
| 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   |  |   | de no expenditures during this   | reporting period   |
|  | from / / /   | _/ <u>02</u> through  | 5 1 17 102   |  |
|  |  |   | <u> </u>   |  |
| Section IV   |  |   |  |  |
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