C-2 Rev. 7/97

CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

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	Committee and Chairpersor	1		Office Sought (if candidate)	District (if any)
	MASCARI			STATE SENATE	24
Mailing Address	☐ Check if address cha		000.	Home Phone	Work Phone
Name of Political Treasurer	T 5T	TWINGALLS	B 3301	135 2515	1362800
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Mailing Address	☐ Check if address cha	- ,p	·	Home Phone	Work Phone
MIJ MUCHE	2 22	_ TWINFAUS	83301	135 2515	7362400
Section II		TYPE OF REPO		<u> </u>	
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🛮 7 Day Pre-Prima	ary Report	☐ 7 Day Pre-General Re	eport	☐ Quarterly (April 30)	<u>\$</u>
☐ 30 Day Post-Pri	mary Report	□ 30 Day Post-General	Report	(only filed by ballot meas	1 150 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
☐ October 10 Pre-General Report		☐ Annual Report		☐ Quarterly (July 30) 🦣 (only filed by ballot meas	₹
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Section IV					_
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