C-2 Rev. 7/97

CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

(Please Print or Type)

Section 1					γ		S ba Clf son di	Janes T	District (if any)	
Name of Candidate or Bolisical Comm		on				Omce 1	Sought (if candi	catte/	2 A 007	
	Check if address of	hanse	City and Zip			Home	Phone		Work Phone	
Mailing Address PO (OOX 15)	D Cubby is differences of		MUU			20	8-7441	768	744-1412	
Name of Political Treasurer										
Mailing Address	☐ Check if address of	change.	City and Zip		-	Home	Phone		Work Phone	
HOBOX 500	7	•	Mille	<u>n~/</u>					208 744-1440	
Section II			TYPE OI	F REPORT	<u> </u>					
Directions: To indicate the ty	pe of report being	g filed, f	ill in the ap	propriate da	ites and	chec	k the appropri	ate bo	x(es). See the	
instructional manual for report	ting periods and is for the period t	due date from	s. 	/	_ throu	igh _	10 110	10	02	
☐ 7 Day Pre-Primary				eneral Repor			arterly (April			
-		·			-	(only filed by ballot measure committees)				
☐ 30 Day Post-Primary Report ☐ 30 D				Day Post-General Report			☐ Quarterly (July 30)			
October 10 Pre-Ger	neral Report	☐ Annual Report			1	(only	filed by ballo	t meas	easure committees)	
Is this Report an	amendment?	□ Yes i	□ No	Īs	this a T	Termir	nation Report	? 🗆	Yes No	
Section III	STATEMEN	T OF N	O CONTR	IBUTIONS	OR E	XPE	NDITURES			
							l- ah - h-ass mass	• • • • • •	errement below fill in	
Directions: If you had no cor the appropriate dates and sign	ntributions or exp a this report. Be	sure to c	s during thi arry forwar	is reporting d the approp	period, priate "(cneci Calen	k the box next dar Year to D	ate" fi	gures in Column II,	
Castina IV										
1 hereby certify t	hat I have receive	ed no cor	ntributions	and have ma	ade no	expen	ditures gurme	g unis r	eporting period	
	from	- /		through 12	<u></u>	70			<u> </u>	
Section IV			SUM	IMARY						
To reach your Calendar Year	to Date flourer	Add this			C	OLU	MN I		COLUMN II	
figures to the Column II figu	res of your previ	ous repor	rt (except o	n line 6).	T	his P	eriod	Cale	ndar Year to Date	
right to the Column to 1-19-			•	•						
Line 1: Cash on Hand January 1, This Year*						XXXX	XXX	s	24832444-4	
Line 2: Enter Cash Balance at Close of Last Reporting Period**					s			s _	XXXXXX	
Line 3: Total Contributions (Enter amount from page 2)					s			s _		
Line 4: Subtotal (Add lines 1, 2 and 3)					S			s_	<u> </u>	
Line 5: Total Expenditures (Enter amount from page 2)					s		<u>. </u>	s _		
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**					s			s _	<u> </u>	
		C -11		·bis salanda	# 1/ #2 F					
*This same figure should be **You must report the cash	entered on line i	he besin	ports illeu	uns calculus reporting no	r year. -ried an	d the	close of the r	eporti	ng period.	
Note that the closing cash b	on nand at bout t	ne begin: rrent rene	orting or are orting perio	d appears of	n the no	ext rei	port as beginn	ing ca	sh on hand.	
							NDITURES			
Section V	_				DN ₀			ı	see attached Schedule C-2A	
Contributions Pledged d					□Nc		<u> </u>		see attached Schedule C-2B	
Incurred Expenditures d	uring this report	ing perio	α σαι ποι γι	et paid:	L-110	ж		`		
	Section VI CERTIFICATION									
Return This Report To:		10		/					B. ales des information	
Pete T. Cenarrusa	I	<u>~</u> Y	0117	William Promount	,				fy that the information	
Secretary of State	in th	nis r e port	is a true, c	omplete and	l correc	t Carr	npaign Financ	ial Dis	sclosure Report as	
PO Box 83720 Boise ID 83720-0080		ired by I		$\langle D \rangle$		•				
fax: (208) 334-2282	Signature of Political Treasurer									
				Signature	of Poli	tical	Treasurer			
				~.97	-3		•			

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