

CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section I

Section 1							
Name of Candidate or Political C		lek Associ	- t	Office Sought (if can	didate) District (if a	ny)	
Mailing Address	☐ Check if address ch	ango City and Zip		Home Phone	Work Phone		
4708 Farm	en Ale	130150	80706	200 061	208-31	54548	
Name of Political Treasurer	2ll					:	
Mailing Address	Check if address ch	ange. City and Zip	11	Home Phone	Work Phone		
Section II	Vene) Vier	1 Idahora	ulb ID	208-529-1	1063 308 7	09-4060	
		TYPE OF					
Directions: To indicate the instructional manual for re			opriate dates at	nd check the approp	riate box(es). Se	e the	
	ort is for the period f		thre	ough/			
7 Day Pre-Primar	y Report	30 Day Post-Pri	imary Report	☐ Octobe	er 10 Pre-General	Report	
☐ 7 Day Pre-General Report ☐ 30 Day Post-General Report ☐ Annual Report							
Semi-Annual Report (Statewide Candidates Only)							
Is this Report a	an amendment?	Yes No	Is this a Ter	mination Report?	☐ Yes	No No	
Section III	STATEMENT	OF NO CONTRIB	UTIONS OR	EXPENDITURES			
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 that I have received no contributions and have made no expenditures during this reporting period from//2005 through//							
Section IV SUMMARY							
To reach your Calendar Ye figures to the Column II fig		ld this report's Colum	ın I	COLUMN I This Period	COLUMN Calendar Year		
Line 1: Cash on Hand January 1, This Year* Line 2: Enter Cash Balance at Close of Last Reporting Period** Line 3: Total Contributions (Enter amount from page 2) Line 4: Subtotal (Add lines 1, 2 and 3) Line 5: Total Expenditures (Enter amount from page 2) Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)** \$ XXXXXX							
Line 7: Outstanding Debt to Date			\$		SEC!		
*This same figure should be entered on line I of all reports filed this calendar year. **You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period. Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.							
	Section V		CERTIFIC	ATION	70 3		
Return This Report To:	_ 1	Emma Mital	11		17A7		
Ben Vsursa I							
PO Box 83720 in this report is a true, complete and correct Campaign Financial Disclosure Report as Boise ID 83720-0080 required by law.							
phone: (208) 334-2852	l	sens Mil					
fax: (208) 334-2282		Sig	ture of Polis	tical Treasurer			
	400	STREET, STREET	199 (1991)	THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	CONTRACTOR AND DESCRIPTION OF STREET	THE CONSTRUCTOR OF THE PARTY OF	