C-2 Rev. 06/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

(Please Print or Type)

| Section 1 | | | | | | |
|---|-------------------|--------------------|--------------------|------------------|-----------------------------|----------------------|
| Name of Candidate or Politica | | hairperson | | | Office Sought (if candidate | District (if any) 52 |
| Stan Basti | | | | | Senator | 17 |
| Mailing Address | Li Check i | f address change. | City and Zip | Da LII | Home Phone | Work Phone 7817 |
| 1561 IN JUEST | VIEW C | <u> </u> | Fagle | 8346 | 1939-8412 | 17605/01/0 |
| Name of Political Treasurer | ctorecon | | a | | SIA. | EUNIOHO |
| Mailing Address | Check | if address change. | City and Zip | | Home Phone | Work Phone |
| 17/8 F H: | acto C | ~ + | Eagle | 8346 | 979-7/57 | 861-7797 |
| Section II | rgare c | <u>, 1</u> | Fage | 0346 | 10/100 | 104/1/07 |
| Section 11 | - | | TYPE OF R | RPORT | | |
| Directions: To indicate | the type of rep | ort being filed, | | | d check the appropriate | box(es). See the |
| instructional manual fac- | | | | • | | |
| This r | eport is for the | period from _ | 11 18 | / CO thro | ugh <u>/2 /3/</u> | 06 |
| 7 Day Pre-Prin | ary Danort | r1 2 | O Day Boot Brim | namu Damant | October 10 | Due Comment Donner |
| / Day Fie-Film | iary Report | L1 3 | 30 Day Post-Prim | iary Report | October 10 | Pre-General Report |
| ☐ 7 Day Pre-Gen | eral Report | □ 3 | 0 Day Post-Gene | eral Report | Annual Re | port |
| | | | _ | - | 7 | |
| Semi-Annual F | Report (Statewic | le Candidates (| Only) | | | |
| Is this Repo | rt an amendmer | nt? | 👿 No | Is this a Term | nination Report? | Yes 🕱 No |
| 10 mio 110po | | 🗀 105 | 1 110 | 15 till5 u 10111 | mation report. | 100 |
| Section III | STATE | MENT OF N | O CONTRIBU | TIONS OR E | XPENDITURES | |
| the appropriate dates and Section IV. I hereby certi | fy that I have re | | tributions and ha | | spenditures during this | |
| Section IV | | · . | SUMMA | RY | | |
| To reach your Calendar | Year to Date fig | ure: Add this | | | OLUMN I | COLUMN II |
| figures to the Column II | figures of your | previous repo | rt (except on line | e 6). Ti | his Period Cal | endar Year to Date |
| T | 1 001 3 | , | | | VVVVV n | 1/01/21 |
| Line 1: Cash on Hand Ja | - | | Desir J## | * <u>/2</u> | 5/2 31 ° | YYYYYY |
| Line 2: Enter Cash Bala Line 3: Total Contribution | | | • | \$ <u> </u> | 100.00 | 28130 W |
| Line 4: Subtotal (Add lin | - | int from page 2 | 2) | \$ 12 | <i>b67.31</i> s | 30414 21 |
| Line 5: Total Expenditur | | nt from nage 2 | 1 | \$ | 0.00 s | 16746.90 |
| Line 6: Cash Balance at | | | • | | 667.31 s | 13601.31 |
| Line o. Cash Dalance at | Close of 1 choo | (Subtract file | 5 Hom me 4) | Ψ 22 | 4 | |
| Line 7: Outstanding Deb | t to Date | | | \$ | 0.00 | |
| | | | | | | |
| *This same figure should | | | | | the alone of the concert | na mariad |
| **You must report the ca Note that the closing ca | | | | | | |
| , tota that the blooming ou | outuitee tot t | comon repe | ning period app | on the ner | port an oogmining o | |
| | | | | | | |
| | Section V | → Jw | feirards artist | CERTIFICA | TION | ; |
| Return This Report To | : (| 1 | f [] [0] [| ・カヘハ | | |

Ben Ysursa Secretary of State PO Box 83720 Boise ID 83720-0080 phone: (208) 334-2852 fax: (208) 334-2282

_, hereby certify that the information

in this report is a true, complete and correct Campaign Financial Disclosure Report as

required by law

Signature of Political Treasurer

DETAILED SUMMARY PAGE

| | | Total This Period | |
|---|------|-------------------|--|
| | | | |
| Contributions | | | |
| Unitemized Contributions (\$50 and less) from top of page | \$ | 100.00 | |
| Itemized Contributions (total all Schedule A sheets) | \$ | | |
| Total Contributions (also enter this figure on page 1, Section IV, line 3) | \$ | 100.00 1,00.00 | |
| | | | |
| Expenditures | | | |
| Unitemized Expenditures (less than \$25) from top of page | \$ | | |
| Itemized Expenditures (total all Schedule B sheets) | \$ | | |
| Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period) | \$ | • | |
| Total Expenditures (also enter this figure on page 1, Section IV, line 5) | \$ | 0.00 | |
| Number of Schedule C-2B pages Attached | | | |
| Incurred Expenditures | | | |
| Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7) | \$ | | |
| Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period) | + \$ | | |
| Subtotal | = \$ | | |
| Payment this Period (Total all C-2Bs - Payment this Period) | - \$ | | |
| Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7) | = \$ | | |
| Number of Schedule C-2A pages Attached | | | |
| Pledged Contributions | | | |
| Amount Pledged this Period | \$ | | |