C-2 Rev. 06/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section I				07.1	an 24 AM 9:	16	
Name of Cardinate or Political Committee and Chairperson				Office Sought (if can			
Mailing Address	☐ Check if address change.	City and Zip		Home Phone CT	the state of the s	IATE	
PO BOX 95	- Circle is address of all aligner	BOISE	83701	0 1	438 208 3	42 1438	
Name of Political Treasurer		1 BU/3 C	83707	2043747	73812063	72 / 150	
JAME BRU	iesch						
Mailing Address	☐ Check if address change,	City and Zip		Home Phone	Work Phone		
PO BOX 95		B0152	83701	20834214	138 2083	421438	
TYPE OF REPORT Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(cs). See the instructional manual for reporting periods and due dates. This report is for the period from/////////							
☐ 7 Day Pre-Primary Report ☐ 30 Day Post-Primary R			mary Report	d October 10 Pre-General Report			
☐ 7 Day Pre-General Report ☐ 30 Day Post-General Report ☒ Annual Report							
☐ Semi-Annual Repo	ort (Statewide Candidates	Only)					
Is this Report a	n amendment?	🕱 No	Is this a Ter	mination Report?	☐ Yes 🛛	No	
Section III	STATEMENT OF N	O CONTRIB	UTIONS OR	EXPENDITURES			
Directions: If you had no on the appropriate dates and sign Section IV. I hereby certify the section of the section is a section in the section is a section in the section in the section in the section is a section in the section is a section in the section in		carry forward (atributions and	he appropriate have made no	"Calendar Year to I expenditures during	Date" figures in C	olumn II,	
Section IV		SUMM					
To reach your Calendar Yea figures to the Column II fig				COLUMN I This Period	COLUMI Calendar Year		
Line I: Cash on Hand January 1, This Year* \$ XXXXXX S							
Line 2: Enter Cash Balance at Close of Last Reporting Period** \$ XXXXXX							
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)** \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \							
Line of Casii Balance at Cic	ise of Ferrod (Subtract line	3 110m mie 4,)*** \$ —		D		
Line 7: Outstanding Debt to Date S							
*This same figure should be **You must report the cash Note that the closing cash b	on hand at both the begin	ning of the rep	orting period a	nd the close of the r	eporting period. ting cash on hand		
	Section V		CERTIFIC	ATION			
Return This Report To:		- a A a	,				
Ben Ysursa Secretary of State	1_ZA	Laure of Patitica	Of Lineagerapie 1 5	, hereby			
PO Box 83720	in this report	is a true, comp	lete and correc	et Campaign Financ	ia! Disclosure Re	port as	
Boise ID 83720-0080	required by l	aw.)	1 1	,		
phone: (208) 334-2852 fax: (208) 334-2282	Tank fillesen						
		Si	gnature of Poli	tical Treasurer			
	(.	Page	: 1				