C-2 Rev. 7/97



CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE (Please Print or Type)

		(Fleaso
Section 1	A THE TOWN	

Name of Condidate or Political Co	mmittee and Chairperson	AN CENTRAL	Office Sought (If	candidate) Di	strict (if any)	
Mailing Address	Dicheek If address change.	City and Zip	Home Phone	US 11 W	ork Roond 9.07	
PO. POX 114	•	SILVERTON	83867 753	-5022	556-2871	
Name of Political Treasurer	0	· · · · · · · · · · · · · · · · · ·	U-04.7	OF GUILLY	HILL UP STATE	
WILLIAM N.	DIRE, JK	•		STATE	DE TOAHOLE	
Malling Address	Check if address change.	City and Zip	Home Phone	Wo	ork Phone	
137 KING 51		WALLACE 8:	3873 <i>.75</i> 3-3	3/8/ 5	36-1536	
Section II		1. 244	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. 1		
	المراكد والمراجع ومساع	TYPE OF REPORT		loss bout	as). San tha	
Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the						
instructional manual for reporting periods and due dates. This report is for the period from						
,						
7 Day Pre-Primar	y Report 🗀 7	Day Pre-General Repor				
	(only filed by ballot measure committees)					
☐ 30 Day Post-Primary Report ☐ 30 Day Post-General Report						
☐ October 10 Pre-G	eneral Raport III A	innual Report	☐ Quarterly (Ji (only filed by b		e committees)	
CI October 10 F16-O	chera report	minat Kepar	(only income)	mior nicesur	o committees,	
is this Report a	n amendment? 🗆 Yes	□ No Is	this a Termination Re	port? 🕒 Ye	es 🗆 No	

Section III	STATEMENT OF N	O CONTRIBUTIONS	OR EXPENDITURI	ES		
Dimeniana Masau kadaa a		duning this seconding	mariad abade the best		-ta	
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.	that I have received no co	ntelbutions and have me	de no evnendinume du	she this was	ortina nariad	
pa thereby certify		106 through			wing beriod	
Section IV		SUMMARY				
To reach your Calendar Yes			COLUMN I		LUMN II	
figures to the Column II fig	ures of your previous repo	rt (except on line 6).	This Period	Calenda	r Year to Date	
I in a 1. Cook on Hand Janua	m. 1. This Vesse		s xxxxxx	\$ 11-	314 70	
Line 1: Cash on Hand January 1, This Year* Line 2: Enter Cash Balance at Close of Last Reporting Period** \$			* / 2/4/7/	-	XXXXX	
			3 4-21-1-	•	<u> </u>	
Line 3: Total Contributions		2)	3	3	-	
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)**			6 7 2KI 7A	: 7	11/17/	
Line o: Lash Balance at Clo	ac of bellog (2000act time	3 Inoni nne 4)**	3 TITLE	3 <u>4</u>	77.70	
*This same figure should be entered on line 1 of all reports filed this calendar year.						
**You must report the cash				e reporting t	eriod.	
Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.						
Section V	CONTRIBUTIONS	PLEDGED - INCURF	ED EXPENDITURE	:5		
Contributions Pledged d	luring this reporting period	but not yet received:	None DS	(see a	stached Schedule C-2A)	
Incurred Expenditures during this reporting period but not yet paid: None D\$(see attached Schedule C-2B)						
						
	Section VI	CERT	TFICATION			
Return This Report To:	1 Will	IAM N. D	ife The	علم بڪلوسم بريان	at the information	
Pete T. Cenarrusa Secretary of State		(name of Political Transver)				
PO Box 83720,	· '	is a true, complete and	correct Campaign Fina	ncial Disclos	ure Report as	
Boise ID 83720-0080	required by la	av.	m A		/	
fax: (208) 334-2282			1/ Nes	e. M		
		Signature o	Political Treasurer			
	•	-	1	11		

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