C-2 Rev. 2/10

CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE



(Please Print or Type)

| Section I | | | | 10 | MAY 13 PM 1:50 | |
|---|--|------------------------------|--|-----------------------------------|-----------------------------|--|
| Name of Candidate or Political Committee and Chaliperson | | | | nt (if candidate) | District (if any) | |
| Mailing Address | | ly and Zip | Home Phone | RICT JUB | Work Phone | |
| P.O. BOX 896 | 4 | EWISTON 83 | 1 | 746-7093 | 208-199-3067 | |
| Name of Political Treasurer | | WI 31 010 0 0 | | 10 1012 | | |
| SAME | | | | | | |
| Mailing Address | Ci | ty and Zip | Home Phone | ; | Work Phone | |
| | | | | | | |
| Change of address for: Candida | ate or Political Committee | ☐ Political Trea | surer 🗆 | | | |
| Section II | _ | TYPE OF REPORT | | | | |
| This filing is an: Original | | | _ | | | |
| This report is for the period from1 | // <u>/</u> | h 5/9/20 | <u>(</u> p | | | |
| 7 Day Pre-Primary Report 30 Day Post-Primary Report | | | | October 10 Pre-General Report | | |
| ☐ 7 Day Pre-General Report ☐ 30 Day Post-General Report ☐ Annual Report | | | | | | |
| Semi-Annual Report (State) | vide Candidates Only) | | | | | |
| Is this a Termination Report: | Yes 🔼 No | | | | | |
| Section III | STATEMENT OF NO | CONTRIBUTIONS OR | EYPENDITURE | • | | |
| Directions: If you had no contribution | | | | | below and sign this report. | |
| | carry forward the appropria | | | | | |
| I harabu andifi that | I hove received no contrib | utions and have made no | ovnondituroo di | uring this range | ing nation and TAM | |
| | r nave received no contrib | | expenditures at | unig this report | ing period. OTHER THE | |
| Section IV | | SUMMARY | | | | |
| , , , , , , , , , , , , , , , , , , , | | | COLUMNI | | COLUMN II | |
| figures to the Column II figures of you | r previous report (except o | n line 6). | This Period | | Calendar Year to Date | |
| | | _ | VVVVV | | 10 5410 | |
| Line 1: Cash on Hand January 1, This Calendar Year* \$ | | | XXXXXXX | \$ _ | | |
| Line 2: Enter Beginning Cash Balance** | | | | \$ _ | XXXXXX | |
| Line 3: Total Contributions (Enter amount from line 5, page 2) | | | | \$ | | |
| | | | | _ | | |
| Line 4: Subtotal (Add lines 1, 2 and 3) \$_ | | | | \$_ | ···· | |
| Line 5: Total Expenditures (Enter amount from line 11, page 2) | | | | \$ _ | | |
| Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4) \$ | | | | \$ _ | | |
| Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) | | | | _ | | |
| *This same figure should be entered of *This is the figure on line 6 of the last Note: The closing cash balance for the | t Campaign Financial Disc | losure Report filed. If this | is your first repo ort as the beginni | rt, this amount ng cash on han | is 0. d. | |
| Sectio | | | | | | |
| Return This Report To: | | _ | | | | |
| Ben Ysursa | hereby certify that the information in this | | | | | |
| Secretary of State | Name of Political Treasurer, hereby certify that the information in this | | | | | |
| l l | | | | | | |
| Phone: (208) 334-2852 | | | | | | |
| Fax: (208) 334-2282 | | 11/1/26 | 16 | >< | | |
| · · · · · · · · · · · · · · · · · · · | | 11/1/1/2 | | al Transvers | | |