

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

C-2 Rev. 5/11

13 JAN 31 PM 3: 12

Section I			5 (3.5)	
Name of Candidate or Political Committee and Chaliperson		Office Sought (if candida	Office Sought (if candidate)	
Maling Address	City and Zip	7.578107 7		
7.0. Box 896	1	8350 746-709	Work Prione	
Name of Political Treasurer	LEWISTON	835W 746-7093	749-3067	
SAME				
Mailing Address	City and Zip	Home Phone	Work Phone	
Change of address for: Candidate or Politica	al Committee Political	reasurer 🗆		
	TYPE OF REPORT	_		
This report is for the period from///	<u> 2012 through _12_131_12</u>	<u> 2/4</u>		
7 Day Pre-Primary Report	☐ 30 Day Post-Primary Repo	ort October	10 Pre-General Report	
☐ 7 Day Pre-General Report	☐ 30 Day Post-General Repo	ort Annual	Report	
Semi-Annual Report (Statewide Candida				
ls this a Termination Report: 🛛 Yes 🏒	Ž(No			
Directions: If you had no contributions or expend	MENT OF NO CONTRIBUTIONS (litures during this reporting period, I the appropriate "Calendar Year to	check the box next to the state		
	ed no contributions and have mad	le no expenditures during this	reporting period.	
Section IV	SUMMARY			
To reach your Calendar Year to Date figure: Add the figure is a column II figures of your previous re		COLUMN I This Period	COLUMN II Calendar Year to Date	
Line 1: Cash on Hand January 1, This Calendar Ye	ear*	\$ XXXXXX	\$	
ine 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)		\$	\$	
ine 7: Outstanding Debt to Date (Enter amount fr	om line 18, page 2)	\$		
*This same figure should be entered on line 1 of a **This is the figure on line 6 of the last Campaign I Note: The closing cash balance for the current rep	Financial Disclosure Report filed, If	this is your first report, this an report as the beginning cash o	nount is 0. n hand.	
Section V				
Return This Report To:	~ ~ -	_		
Ben Ysursa Secretary of State	TERP M. BRUDIE	, hereby certify th	at the information in this	
DO Boy 83700	Name of Political Treasurer		and a required by law	
	s a true, complete and correct Carr	npaign Financial Disclosure Re	porras required by law.	
Phone: (208) 334-2852 Fax: (208) 334-2282	1/1/20			
1 dx. (200) 00-2202		Signature of Political Treasu	IrAr	
	Pagen	Olynamic of College Heast		
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