C-2 Rev. 7/97

CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section	T
Section	

Section I				log - Ch (if con	ndidate) District (if any)	
Name of Candidate or Political Committee and Chairperson				Office Sought (if candidate) House of App 18 4		
	Nchanan	City and Zip		Home Phone	Work Phone	
Mailing Address	☐ Check if address change.	City and Zip	PODAS	319-00	517 761-1767	
Name of Political Treasurer	skow Ln	10.2	037			
vame of Political Treasurer	ve as	460ve				
Mailing Address	☐ Check if address change.			Home Phone	Work Phone	
······································						
Section II		TYPE OF RE	POPT			
Directions: To indicate the ty	ne of report heing file	d fill in the approp	riate dates and	d check the approp	priate box(es). See the	
instructional manual for repor	ting periods and due	dates.		•••		
This report	is for the period from		throu	ugh/	/	
· · · · · · · · · · · · · · · · · · ·	_			Commonly (Am	-:1 30)	
☐ 7 Day Pre-Primary	Report [] 7 Day Pre-Genera	l Report	☐ Quarterly (Apr	lot measure committees)	
El Co Dest Baiman	m. Domont N	30 Day Post-Gene		(Only fried by bar	Tot mousure commission,	
☐ 30 Day Post-Prima	ry Report	Jo Day 1 ost-com		☐ Quarterly (July	y 30)	
☐ October 10 Pre-Ger	neral Report C	Annual Report		(only filed by bal	llot measure committees)	
P			*	n - touttee Dane	a An Vos □ No	
Is this Report an	amendment?	es 🙀 No	ls this a	Termination Repo	ort? 🔏 Yes 🗆 No	
Cooking III	STATEMENT O	F NO CONTRIBU	TIONS OR E	XPENDITURES	<u></u>	
Section III						
Directions: If you had no con	ntributions or expendi	tures during this rep	porting period	, check the box ne	ext to the statement below, fill in	
the appropriate dates and sign	n this report. Be sure	to carry forward the	e appropriate "	Calendar Year to	Date" figures in Column II,	
O TV						
I hereby certify t	hat I have received no	contributions and thro	nave made no	expenditures duri	ing this reporting period	
	from/	Al / a mig	ugn			
Section IV		SUMMA	RY			
To reach your Calendar Year	to Date figure: Add	this report's Colum		COLUMN I	COLUMN II	
figures to the Column II figu	res of your previous r	eport (except on lin	e 6). T	This Period	Calendar Year to Date	
_				3/3/3/3/3/3/3/	, 0	
Line 1: Cash on Hand Januar	y 1, This Year*		\$ <u> </u>	XXXXXX	\$ <u> </u>	
Line 2: Enter Cash Balance a	at Close of Last Repor	ting Period**	<u>\$</u> _	<u> </u>	\$ <u> </u>	
Line 3: Total Contributions (ige 2)	\$ _			
Line 4: Subtotal (Add lines 1	, 2 and 3)		\$_	<u> </u>	\$_ <u></u>	
Line 5: Total Expenditures (Enter amount from page 2)					\$	
Line 6: Cash Balance at Clos	se of Period (Subtract	line 5 from line 4)*	*		\$	
***************************************	automad on line 1 of a	Il reports filed this	calendar vear			
*This same figure should be **You must report the cash	on hand at both the be	oinning of the repo	etting period a	nd the close of the	e reporting period.	
Note that the closing cash b	alance for the current	reporting period ap	pears on the n	ext report as begin	nning cash on hand.	
Trote that the blooms than a						
Section V	CONTRIBUTIO	NS PLEDGED - I				
Contributions Pledged d	uring this reporting pe	eriod but not yet rec	eived: 🖎	one □\$	(see attached Schedu	
Incurred Expenditures			•	one □\$	(see attached Schedule C-2	
incurred Expenditures c	turing this reporting p	eriou oue noo y or pa				
	Section VI	·	CERTIFIC	ATION		
Datum This Banast Tax	Section VI		_			
Return This Report To: Pete T. Cenarrusa	1 <i>L</i>	· v /2	Nellaw	aかつ ^ん , here	by certify that the information	
Secretary of State			T		ncial Disclosure Report as	
PO Box 83720			icle and corre	or Campaign Fina	month and the state of the stat	
Boise ID 83720-0080	required	by law.	\ lk -			
fax: (208) 334-2282						
		Sig	gnature of Pol	itical Treasurer		
	J	`	•			