## **CAMPAIGN FINANCIAL DISCLOSURE REPORT**

**SUMMARY PAGE** (Please Print or Type)

Section I					
Name of Candidate or Political Co	ommittee and Chairperson			Office Sought (if candidate)	District (if any)
Valerie (	rump			Senate	$ \alpha $
Mailing Address	Check of address cha		110	Home Phone	Work Phone
Name of Political Treasurer	, Maic Ridg	e 10 Boise 8370	<u> </u>	377-1997	363-1807
Name of Folitical Treasurer	Jan Davis	dson			
Mailing Address	☐ Check if address cha			Home Phone	Work Phone
121E-31	6th	Garden City 8	3714	424-9985	353-1052
Section II		TYPE OF REPOR			
Directions: To indicate the	type of report being	filed, fill in the appropriate d		I check the appropriate be	ox(es) See the
instructional manual for rep	orting periods and du	ie dates.		1 2	, ,
This repor	rt is for the period fro	om <u>  0                                  </u>	<u>≯</u> throu	igh <u>(() 1 20 1</u>	62
☐ 7 Day Pre-Primar	v Report	□ Day Pre-General Repo	nrt .	☐ Quarterly (April 30)	
☐ 30 Day Post-Primary Report		☐ 30 Day Post-General Report		(only filed by ballot measure committees)	
☐ October 10 Pre-General Report		☐ Annual Report		(only filed by ballot measure committees)	
Is this Report a	n amendment?	Yes 19 No Is	this a T	ermination Report?	Yes <del>⊠ N</del> o
Section III	STATEMENT	OF NO CONTRIBUTIONS	S OD E	YPENDITUDES	
				-	
Directions: If you had no co	ontributions or expen	ditures during this reporting	period,	check the box next to the	statement below, fill in
the appropriate dates and sign Section IV.	gn this report. Be sur	re to carry forward the appro	priate "(	Calendar Year to Date" fi	gures in Column II,
	that I have received	no contributions and have m	ade no e	expenditures during this r	enorting period
	from [U/	/ Og through	70",		eporting period
Section IV					
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