C-2 Rev. 04/04



phone: (208) 334-2852 fax: (208) 334-2282

CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

2005	JUH	20	AM	o.	
		0	1411	Ċ.	16

Section I			8:16
Name of Candidate or Political Committee a	and Chairperson	Office Sought (if o	
Mailing Address W. Front	peck if address change. City and Zip	Home Phone	Work Phone 756
Name of Political Treasurer	2:1		
Mailing Address C	heck if address change. City and Zip	Home Phone 744-87	Work Phone 287-756
Section II	TYPE OF RE		
!	report being filed, fill in the appropriet and due dates. the period from///	• •	•
☐ 7 Day Pre-Primary Report	30 Day Post-Prima	ary Report Octo	ober 10 Pre-General Report
☐ 7 Day Pre-General Report	□ 30 Day Post-Gene	eral Report	ual Report
☐ Semi-Annual Report (Stat	ewide Candidates Only)		()
	dment? Yes No		
Section III ST	ATEMENT OF NO CONTRIBUT	HONS OR EXPENDITURE	
Section IV To reach your Calendar Year to Da	we received no contributions and have my horizontal through the figure: Add this report's Column your previous report (except on line	RY 1 COLUMN I	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, T	his Year*	\$_XXXXXX	\$
Line 2: Enter Cash Balance at Clos	e of Last Reporting Period**	\$	\$ XXXXXX
Line 3: Total Contributions (Enter	amount from page 2)	\$	\$
Line 4: Subtotal (Add lines 1, 2 and	d 3)	\$	\$
Line 5: Total Expenditures (Enter a	mount from page 2)	\$	\$
Line 6: Cash Balance at Close of P	eriod (Subtract line 5 from line 4)**	\$	\$
Line 7: Outstanding Debt to Date		\$	
**You must report the cash on han-	d on line 1 of all reports filed this ca d at both the beginning of the report for the current reporting period app	ing period and the close of the	reporting period. nning cash on hand.
Return This Report To: Ben Ysursa Secretary of State PO Box 83720 Boise ID 83720-0080	I Debora L (name of Political Tre in this report is a true, complete required by law.		y certify that the information cial Disclosure Keport as