## **CAMPAIGN FINANCIAL DISCLOSURE REPORT**



SUMMARY PAGE (Please Print or Type)

Section I				11 JAN 31 AM 8: 2
Name of Candidate or Political Committee and Chairperson  SAAC TIKE YOUNG			ght (if candidate)	District (if any)
Mailing Address	City and Zip	57AT	= HOUSE	SECRET BY OF STATE
2974 HWY 8	MUSCOW		382-1854	584 AUT DFZIRANO
Name of Political Treasurer				
Mailing Address	City and Zip	Home Pho		Work Phone
1974 HWY 8	1		382-1854	569-872-2260
Change of address for: Candidate or Politica		al Treasurer	300 (0)	301 01
Section II	TYPE OF REPOR			
	Amendment			
This report is for the period from $12 / 62$	through 1 / 31	<u> </u>		
☐ 7 Day Pre-Primary Report	☐ 30 Day Post-Primary Re	eport [	October 10 P	re-General Report
☐ 7 Day Pre-General Report	☐ 30 Day Post-General R	eport <b>D</b>	Annual Repor	rt
☐ Semi-Annual Report (Statewide Candida	ites Only)			
Is this a Termination Report:	□ No			
☐ I hereby certify that I have receive	the appropriate "Calendar Year red no contributions and have m	to Date" figures in Co	lumn II, Section	IV.
Section IV	SUMMARY			
To reach your Calendar Year to Date figure: Add the figures to the Column II figures of your previous re		COLUMN This Perio		COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Ye	ear*	\$_XXXXXX	\$_	2.41
Line 2: Enter Beginning Cash Balance**		\$ 2.41	\$ _	XXXXXX
Line 3: Total Contributions (Enter amount from line	5, page 2)	\$_ <b>6.00</b>	\$ _	0.00
Line 4: Subtotal (Add lines 1, 2 and 3)		\$ 2.41	\$ _	2.41
Line 5: Total Expenditures (Enter amount from line	11, page 2)	\$_ <i>Ø.90</i>	\$_	Ø , Ø Ø
Line 6: Enter Ending Cash Balance (Subtract line 5	from line 4)	\$ 2.41	\$_	Ø. Ø Ø
Line 7: Outstanding Debt to Date (Enter amount fro	om line 18, page 2)	\$_0.00		
*This same figure should be entered on line 1 of al **This is the figure on line 6 of the last Campaign F Note: The closing cash balance for the current rep	inancial Disclosure Report filed	. If this is your first rep	ort, this amount ning cash on han	is 0. d.
Section V				
Secretary of State	SAAC YOUNG  Name of Political Treasurer	, hereb	y certify that the	information in this
PO Box 83720	a true, complete and correct Ca	ampaign Financial Dis	closure Report a	s required by law.
Phone: (208) 334-2852 Fax: (208) 334-2282				
	111	Signature of Polit	ical Treasurer	
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