

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

C-2 Rev. 12/14

Section I		15 %	IAV IO AM	in. 20		
Name of Candidate or Political Committee and Chairperson			Office Sought (if candidate) District (if any)			
Mailing Address Collett	City and Zip	- SEUN	Senate.	STATE		
21255 LonkeyLn	Caldwell	8360 9T	ALEOUTHE	AUO	Work Phona 208-505-1951	
Name of Political Treasurer Kelly Collett			- MU - 100	<u> </u>	we 305-1101	
Mailing Address	City and Zip		Home Phone	 	Work Phone	
21255 Lonkeyln.	Caldwell 8	3607	208-455		208-830-0852	
Change of address for: Candidate or Political Com	mittee Politi	cal Treasurer			X08 0000 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Section II	TYPE OF REPO	PRT				
This filling is an:						
	through <u>05 / 01</u>					
	30 Day Post-Primary F	Report	☐ Octo	ober 10 Pre-	General Report	
7 Day Pre-General Report	30 Day Post-General F	Report .	☐ Ann	ual Report		
Semi-Annual Report (Statewide Candidates On	ıly)					
Is this a Termination Report: Yes X	No					
Section III STATEMENT	OF NO CONTRIBUTION	IS OR EXPE	VDITURES	-		
Directions: If you had no contributions or expenditures of	during this reporting peri	od, check the	box next to the	statement be	low and sign this report	
be sure to carry forward the ap	propriate "Calendar Yea	r to Date" figu	res in Column II,	Section IV.	•	
I hereby certify that I have received no	contributions and have r	nade по expe	nditures during t	his reporting	period.	
Section IV	SUMMARY					
To reach your Calendar Year to Date figure: Add this report (ex figures to the Column II figures of your previous report (ex	ort's Column I cept on line 6).		OLUMN I nis Period		COLUMN II olondar Year to Date	
Line 1: Cash on Hand January 1, This Calendar Year*		\$X	XXXXX	\$	Ø	
Line 2: Enter Beginning Cash Balance**		\$	Ø	\$	XXXXXX	
Line 3: Total Contributions (Enter amount from line 5, page 2)		\$	Ø	\$	Ø	
Line 4: Subtotal (Add lines 1, 2 and 3)		\$	Ø	\$	Ø	
Line 5: Total Expenditures (Enter amount from line 11, page 2)		\$ A	Ø	\$	Ø	
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)		s 4	Ø	\$	Ø	
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)		\$ Q	8	v		
*This same figure should be entered on line 1 of all reports **This is the figure on line 6 of the last Campalgn Financia Note: The closing cash balance for the current reporting p	s filed this calendar year	If this is you	r first report, this e beginning cash	amount is 0 1 on hand.		
Section V						
Return This Report To: Secretary of State PO Box 83720 Boise ID 83720-0080	Name of Political Treasurer		_, hereby cartify			
Phone: (208) 334-2852 report is a true, Fax: (208) 334-2282	complete and correct Ca	empaign Finar	ncial Disclosure	Report as re	quired by law.	
	Page 1	Signature	of Political Trea	aurer		
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