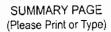
## CAMPAIGN FINANCIAL DISCLOSURE REPORT

C-2 Rev. 10/07



10 MAY 14 PM 2: 38

Section I  Name of Candidate or Political Committee and Chairper	SOU .	Office Sought (if car	ndidate) STA District (if any)
Yablic Employers PAC		Home Phone	Work Phone
Mailing Address	City and Zip	,	
Name of Political Treasurer		403 000 300	(70)
Mailing Address	eiwirth City and Zip	Heme Phone	Work Phone
	_	705 20860827	73 208 343 1038
	· · · · · · · · · · · · · · · · · · ·	Treasurer	
Section II	TYPE OF REPORT		
This filing is an: 💆 Original	□ Amendment	10	
This report is for the period from/			-bas 10 Day Caparol Borned
7 Day Pre-Primary Report 30 Day Post-Primary Report		ort 🔲 Oct	ober 10 Pre-General Report
7 Day Pre-General Report 30 Day Post-General Report		port	ual Report
Semi-Annual Report (Statewide Ca	andidates Only)		
s this a Termination Report:	□ No		
	TATEMENT OF NO CONTRIBUTIONS		
Directions: If you had no contributions or ea	xpenditures during this reporting period rward the appropriate "Calendar Year t	, check the box next to the o Date" figures in Column II	statement below and sign this report.  I. Section IV.
, ,			
	received no contributions and have ma	de no expenditures during	this reporting period.
Section IV  To reach your Calendar Year to Date figure:	SUMMARY	COLUMN	COLUMN II
igures to the Column II figures of your previous		This Period	Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Year*		\$_XXXXXX	\$ 56.16
Line 2: Enter Beginning Cash Balance**		\$ 56.16	\$XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)		\$	\$ 8
Line 4: Subtotal (Add lines 1, 2 and 3)		\$ 56.1b	\$ 56.16
Line 5: Total Expenditures (Enter amount from line 11, page 2)		\$	\$
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)		s 56.16	s 56-16
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) \$_		\$\$	·
*This same figure should be entered on line **This is the figure on line 6 of the last Camp Note: The closing cash balance for the curre	aign Financial Disclosure Report filed.	if this is your first report, thi report as the beginning ca	s amount is 0. ish on hand.
Section V			
Return This Report To:	a Armaria		
Ben Ysursa Secretary of State	M. Alex Newistl	hereby certif	fy that the information in this
PO Box 83720	port is a true, complete and correct Car	noaign Financial Disclosure	e Report as required by law.
Phone: (208) 334-2852	^	1	
Fax: (208) 334-2282	M S		

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