



C-2 Rev. 12/14

16 OCT 25 PM 1:27

| Section | | | of Ci | SEUNCIARY OF STATE | | |
|--|---|--|--------------------------------------|---|--|--|
| Name of Candidate or Political Committee and Ch | Olice Sough (inc | Office Sought (Description) OF IDAHO23 | | | | |
| Mary Ann Richards | | | | • | | |
| Mailing Address 1452 N. State Line | City and Zip | | Home Phone | Work Phone | | |
| | Rd. Homedale | 83628 | 208 337. | 4467 | | |
| Name of Political Treasurer SELF | • | | | | | |
| Mailing Address | City and Zip | | Hame Phone | Work Phone | | |
| | | | | | | |
| Change of address for: Candidate | or Political Committee Politi | cal Treasur | rer 🛚 | | | |
| Section II | TYPE OF REP | | _ | | | |
| This filing is an: Original | ☐ Amendment | | | | | |
| This report is for the period from 10 | 01 12016 through 10 123 | 12016 | | | | |
| ☐ 7 Day Pre-Primary Report ☐ 30 Day Post-Primary F | | | Report October 10 Pre-General Report | | | |
| ☐ 7 Day Pre-General Report ☐ 30 Day Post-General Report ☐ 30 Day Pos | | | Report | | | |
| Semi-Annual Report (Statewid | e Candidates Only) | | | | | |
| s this a Termination Report: U Ye | : | | | | | |
| Section III Directions: If you had no contributions | STATEMENT OF NO CONTRIBUTIO | | | statement below and sign this repu | | |
| Be sure to car | ry forward the appropriate "Calendar Ye | ar to Date" | figures in Column il | , Section IV. | | |
| | | | | | | |
| I hereby certify that I h | ave received no contributions and have | made no e | xpenditures during | this reporting period. | | |
| Section IV | SUMMARY | , | | | | |
| To reach your Calendar Year to Date figure: Add this report's Column ! | | | COLUMN I | COLUMN II | | |
| figures to the Column II figures of your p | | | This Period | Calendar Year | | |
| | | | | to Date | | |
| Line 1: Cash on Hand January 1, This Calendar Year* | | | XXXXXXX | \$ | | |
| Line 2: Enter Beginning Cash Balance** | | | | \$ XXXXXXX | | |
| Line 3: Total Contributions (Enter amount from line 5, page 2) | | | | \$ | | |
| Line 4: Subtotal (Add lines 1, 2 and 3) | | | | \$ | | |
| Line 5: Total Expenditures (Enter amount from line 11, page 2) | | | 0, | \$ 0. | | |
| Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4) | | \$ | o. | \$ 0. | | |
| Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) | | | 0. | | | |
| • | • • | - | | | | |
| This same figure should be entered on I | ine 1 of all reports filed this calendar ye | ar. | | | | |
| "This is the figure on line 6 of the last C | ampaign Financial Disclosure Report III | ed. It this is | your arst report, the | s amount is u. | | |
| Note: The closing cash balance for the c | | ext report | as the beginning cas | AL OIL URLET. | | |
| Section V | | | | | | |
| Return This Report To: | | | | | | |
| Lawerence Denney | 1. Mary Ann Richar | ds | , hereby certif | ly that the information in this | | |
| PO Roy 83720 Name of Political Treasurer | | | | | | |
| Baise ID 83720-0080 | report is a true, complete and correct Campaign Financial Disclosure Report as required by law. | | | | | |
| Phone: (208) 334-2852 | | | | 1 1 | | |
| Fax: (208) 334-2282 | Thany | arn | Richar | ds | | |
| | | Sign | ature of Political Tre | easurer | | |