

Fax: (208) 334-2282

CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

C-2 FEB 10 '20 PH5: 32 PH IDAHO SECRETARY OF STATE

| Section I | | | | | | District (if any) | |
|--|--|--|--------------------------------------|--|--------------------------------|----------------------|--|
| Name of Candidate or Political Committee and Chairperson | | | | Office Sought (if candid | ate) | District (if any) | |
| Mailing Address | 7 Alexander | City and Zip | <u></u> | Home Phone | Work Pho | | |
| 13279 Ma | Manningland | Pocatello | 83202 | | 208- | <u> 243-1071</u> | |
| Name of Political Treasurer () One + Maro | | | | | | | |
| Mailing Address City and Zip | | | | Home Phone | | | |
| 245 James Aug | | Chubback | <u>83202</u> | 208-237-45 | 34 | | |
| Change of address for: C | andidate or Political Commit | tee 🔲 Poli | ical Treasurer | | | | |
| Section II | Silvert | TYPE OF REP | ORT | | | | |
| This filing is an: You can be seen to be s | | ough <u>12 / 3 [</u> | 1 19. | | | | |
| 7 Day Pre-Primary Re | | 0 Day Post-Primary | Report | ☐ Octobe | er 10 Pre-Genera | al Report | |
| 7 Day Pre-General Report 30 Day Post-General Re | | | | | | | |
| Sami Annual Report | (Statewide Candidates Only) | | | | | | |
| Is this a Termination Report: | ☐ Yes 🗹 No | | | | | | |
| Section III | STATEMENT OF | NO CONTRIBUTION | ONS OR EXP | ENDITURES | | المحمدة واللاحداد في | |
| Directions: If you had no cont | ributions or expenditures dur ure to carry forward the appr | ring this reporting pe coriate "Calendar Ye | eriod, check the ear to Date" fic | e box next to the sta lures in Column II, S | itement below at ection IV. | na sign this report. | |
| | | | | | | 4 | |
| | fy that I have received no co | | | enatures aumig trits | teborring beno | J. | |
| Section IV | | SUMMAR' | | COLUMN I | COLU | IMN II | |
| To reach your Calendar Year to figures to the Column II figures | of your previous report (exce | ept on line 6). | | This Period | Calenda to D | ar Year | |
| Line 1: Cash on Hand January 1, This Calendar Year* | | | \$ | xxxxxx | s <u>581</u> | .51 | |
| Line 2: Enter Beginning Cash Balance** | | | \$ | | \$ <u>XXX</u> | XXX | |
| Line 3: Total Contributions (Enter amount from line 5, page 2) | | | \$ | | \$ | 2 | |
| Line 4: Subtotal (Add lines 1, 2 and 3) | | | \$ | | \$ <u>581.</u> | 51 | |
| Line 5: Total Expenditures (Enter amount from line 11, page 2) | | | \$ | | \$ <u> </u> | <u>-</u> | |
| Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4) | | | \$ | ··· | \$ 581. | 51 | |
| Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) | | | \$ | | | • | |
| *This same figure should be en **This is the figure on line 6 of Note: The closing cash balance | the last Campaign Financial | Disclosure Report fi | led. If this is y | our first report, this a the beginning cash | mount is 0. on hand. | | |
| | Section V | | | | | | |
| Return This Report To: Ben Yaursa Secretary of State | 1, Janet | Marolyn C | ensen | , hereby certify t | hat the informat | tion in this | |
| PO Box 83720 Boise ID 83720-0080 | I I I I I I I I I I I I I I I I I I I | | | | | | |
| Phone: (208) 334-2852 | | | | | | | |

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Signature of Political Treasurer