

CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type)

Section I			
Name of Candidate or Political Committee SANDI ISLOEN	\triangle	Office Sought (if candidate) MAYOR_	Term
I	k if address change City and Zip	Home Phone	Work Phone
2768 STONE P	VINES CT CDA, 838	15 667-4934	664-3874
RICK MAXEY			
Mailing Address PO BOX 1767	k (Faddress change City and Zip CDA, 838)	6 765 - 7655	Work Phone
Section II			
Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the instructional manual for reporting periods and due dates. This report is for the period from 1 / 1 / 06 through 12 / 3/ / 06 Cl October 10 Pre-General Report Cl 7 Day Pre-General Report Cl 30 Day Post-General Report			
Annual Report			
Is this report an an	nendment? I Yes XNo	Is this a Termination Report?	□ Yes □ No
Section III	STATEMENT OF NO CONTRIBU	TIONS OR EXPENDITURES	;
the appropriate dates and sign this Section IV.	ations or expenditures during this reporting report. Be sure to carry forward the app	ropriate "Calendar Year to Date"	figures in Column II,
I hereby certify that I from	have received no contributions and have om through	made no expenditures during this	s reporting period
Section IV	SUMMA	RY	
To reach your Calendar Year to De Column I figures to the Column II (except on line 6)		COLUMN I This Period	COLUMN II Calendar Year to Date
Column I figures to the Column II (except on line 6).	figures of your previous report	This Period	
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