C-2 Rev. 06/04

CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

SUMMARY PAGE (Please Print or Type)

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CITY CLERK
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Section I Name of Candidate or Political Committees	and Chairnerson	Office Sought (if candidate)	Тепа
Ine Kunk	<i>-</i>	Council	
Mailing Address Check	if address change City and Zip	Home Phone	Work Phone
Name of Political Treasurer	0.10		
Mailing Address Check	if address change City and Zip	Home Phone	Work Phone
8169 N Answe	orth Hay	du 8197154	
Section II	Type of Re	PORT	
Directions: To indicate the type of a instructional manual for reporting portion of this report is for the October 10 Pre-General	eriods and due dates C/ (/ /	07 through 9/30	
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☐ Annual Report	3 -0 El 35-0 El 37-	Is this a Termination Report?	□ Yes □ No
Is this report an ame	endment? Yes No STATEMENT OF NO CONTRI		
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Directions: If you had no contribut the appropriate dates and sign this r	ions or expenditures during this reprepart. Be sure to carry forward the	orting period, check the box next t appropriate "Calendar Year to De	o the statement below, fill in te" figures in Column II,
Section IV. I hereby certify that I hereby certification that I	nave received no contributions and h	igh	this reporting period
Section IV	SUM	MARY	
To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report			
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