## CAMPAIGN FINANCIAL DISCLOSURE STATEMENT DGI 6 - 2014 /2:45

	or State and Local Candidates  2.a. NAME OF STATE WEST AND STATE OF STATE O
1. DATE OF REPORT	r Single-Candidates  2.a. NAME OF CANDIDATE OR COMMITTEE
10/6/12	2.a November 2 and date Committees
2.b. IF COMMITTEE NAME OF CANDIDATE	2.a. NAME OF CANDIDATE OR COMMITTEE
NDIDATE	Orm Gucca 1 1
4.a. CAMPAICN AND OCCOR	Joe a / /
4.a. CAMPAIGN ADDRESS AND PHONE Street or Rural Route	3.5
8/12/2	3. ELECTION DATE
4.b. CANDIDATE'S HOME ADDRESS (if different the Street or Rural Route	74.7 3
Street or Rural Route	an 4.a.)  State  Zip Code  Phone  Phone
L code	an 4.a.) Phone
5. OFFICE SOLICITE	State \$7090 615:212 C
5. OFFICE SOUGHT (include district number, if app	State Zip Code
7. CATEGORY OR REPORT (Check one) FIRST OLUMPTED SECOND	ficable)  6. NAME OF Phone
CATEGORY OR REPORT (Check one)	6. NAME OF POLITICAL TROPS
FIRST SECOND	6. NAME OF POLITICAL TRAA SURER (may be candidate)
QUARTER QUARTER THRD	FOURTH D
8.a. BEGINNING DATE OF REPORTING PERIOD	NIADTED PRE- II
9. (Check one)	PD/see
J. (Check one)	8.b. ENDING DATE OF PORTING PERIOD SUPPLEMENTAL SUPPLEMENTAL
a. This campaign is	SUPPLEMENTAL SUPPLEMENTAL
tures total \$1,000 cless from detailed disal-	
b. This campaign	SUPPLEMENTAL SUPPLEMENTAL  SU
and/or expenditures to file a detail	Complete items 12d 100 including in-kind) read
more than \$1,000 for	cial disclosure by
10. I/we do solemply puggs	his reporting period contributions (incl.
accurate accounting of carr that the inform	(including in-kind) received to the
Financial Disclosure Act.) A contributions and one	ontained in this a
other para of affir other para of affir	inis reporting period.  Intained in this campaign financial disclosure report is true and that this report is an one as defined by the federal internal revenue code.
William purpo	is as design contribute by the candidate is true and that the
Silharing 1	defined by the federal interest been expended to the Campaign and this report is an
Signature of candidate	-/4/   whermal revenue code for the personal financial
date	A Katana M
1. WITNESS SIGNATURE	Signature
ShiraMad. O	signature of political treasurer 10-6-14
- Janeman	date
Léignature of witness 10-6-14	
date	X MADICALO
12. SUMMARY	THURSON
a. BALANCE ON HAND	signature of witness 10-6.14
a. BALANCE ON HAND LAST RE	date
b. TOTAL RECEIPTS THIS PERIOD	
	43,00
c. TOTAL DISBURSEMENTS THIS P	100-
THISP	5 6000
d. BALANCE ON HAND (12.a. plus	
12.c.)	569547
A TOTALLOANIO	
e. TOTAL LOANS OUTSTANDING	() 2. (3)
t TOTAL COURS	year 3 3 1
f. TOTAL OBLIGATIONS OUTSTANDIN	JA 52453
21576	\$_ ()
SS-1100 (Par 2000)	
SS-1109 (Rev. 2/06)	5_0





## ITEMIZED STATEMENT OF LOANS - CANDIDATE COMMISSION

						.0100	MANOS M	~					
1. NAME OF CANDIDATE (				REPORT	COVE	RING	THE PERIOD						
							F	ROM:		TO	:		
3. COMPLETE THE APPRO	PRIATE ITEMS FO	R EACH I	TEMIZ	ED LOAN	(loans totaling m	ore than \$1	00 from any sou	rce during the	period)				
Complete the Following for the S										-			
First Name	Middle Name	Middle Name Out			Loan Balance	s	Loan	Outstanding Loan Balance					
LastName (Out of the N				(Beginning	of Period)	riod) Received		Payments		(End of Period)			
Last Name/Organization Name				52	4=								
Address	Address				Received For:  Date of Loan  Primary Election  General Election								
City	State	Zip Code		57755	(Local Elections (		ai Election						
	List All Endorser	s or Guara	ntors fo	r Above Loa	n (If more spac	ce is neede	ed please atta	ch a page)					
First Name	Middle Name			1	/ First Name					Middle Name			
Last Name/Organization Name	Last Name/Organization Name				Last Name/Organization Name								
Address	DI O				Address	1	0						
City	S	State Zip C		de	City				State		Zip Code		
Amount Guaranteed Outstanding					Amount Guaranteed Outstanding								
First Name	st Name Middle Name				First Name					Middle Name			
Last Name/Organization Name				Last Name/Organization Name									
Address				Address									
City	ly State Zip C			de	City						Zip Code		
Amount Guaranteed Outstanding					Amount Guarant	teed Outstar	nding						
First Name	me Middle Name				First Name Middle Name								
Last Name/Organization Name					Last Name/Organization Name								
Address					Address								
City	State Zip Co			le	City State Zip Code								
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding									
First Name	Mi	Middle Name			First Name					Middle Name			
ast Name/Organization Name			Last Name/Organization Name										
Address				Address									
City	Sta	ate	Zip Code	е	City State Zip Code						Zip Code		
mount Guaranteed Outstanding					Amount Guarante	eed Outstan	ding						
. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16. on summary page.) (Total loan payments should also be shown in item 20. on summary page.)								anding Loan Balance End of Period)					
(Total outstanding loan balance should also be shown in item 12.e. on front page.)											()		