CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred *each* <u>did not exceed \$250.00</u> during the reporting period.

FILER IDENTIFICATION NUMBER	•				REPORT FILED ON BEHALF OF	CANDIDATE	COMMITTEE	2./	LOBBYIST	3.
NAME OF FILING COMM	ITTEE, CANDIDA	,	DRICK	c		1	V:			
STREET ADDRESS	12 1			3						
1149	N.	14th 5	7.							
ALLE	DVTO	N			STATE		/8/02			
TYPE OF REPO	K1		GHT BY CANDIDATE		DISTRICT NO.	PARTY	DA1	ACCRECATE VALUE OF STREET	LECTION	AR
6TH TUESDAY PRE-PRIMARY	1: /4	LLENIOU	NCITY	COUNC	1	Der	, ,	OFFICE U	SE ONLY	
2nd FRIDAY PRE-PRIMARY	2	DATES OF REPORTING PERIOD CASH BALANCE AT END OF REPORTING PERIOD: S3,750,33 TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: S3,750,33								
30 DAY POST-PRIMARY	3									
6TH TUESDAY PRE-ELECTION	4.									
2ND FRIDAY PRE-ELECTION	5.									
30 DAY POST-ELECTION	6.		AMENDMENT REPORT?	YES	NO /					
ANNUAL REPORT			TERMINATION REPORT?	YES	NO i					
statement is	filed on b	ehalf of a <u>Ca</u>	andidate, the (Candidate	didates's Com must sign here Lobbyist must s		Treasurer mu	ıst sigr	n here.	
SWORN TO	AY OF STANDS AND SUBSCR	TY DOLLARS (\$25) IBED BEFORE MI AND A 12 - YLVANIA SIGNATURE SUNTO 5	50.00) AND THIS RE E THIS	PORT IS, TO TH	SIGN. TER AREA CODE	ATURE OF PERIOR	SON/SUBMITTING TED NAME AYTIME TELEPHON	REPORT	MPLETE.	T
ART II - statement is	filed on b	ehalf of a <u>Ca</u>	andidate's Aut	horized Co	<u>ommittee,</u> Cand	idate must	sign here.			
		T TO THE BEST O 33, No. 320) AS		ND BELIEF THIS	POLITICAL COMMITTE	E HAS NOT VIOL	ATED ANY PROVISIO	ONS OF TH	ACT OF	
SWORN TO	AY OF	STANIA		015	DAK DAK	SIGNATURI	OF CANDIDATE HEN TED NAME	DRI	cks	
MY NOTA	io, Notary lown, Lehigh	Subfic Mo	27 20 DAY YR.	19	AREA CODE	- <u>2</u>	39 -07/. AYTIME TELEPHON	5 IE NUMBI	ER	