

C-2 Rev. 06/04



CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE (Please Print or Type)

06 JAN 31 AM 10:37

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson (IOHA HyPAC - Betsy Chandler, Chair), Office Sought (SECRETARY OF STATE), Mailing Address (29241 CANAL ROAD, PARMA ID 83660), Home Phone (208-722-9911), and Work Phone (208-888-4711).

Section II

TYPE OF REPORT

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 1/1/05 through 12/31/05

- Checkboxes for 7 Day Pre-Primary Report, 30 Day Post-Primary Report, October 10 Pre-General Report, 7 Day Pre-General Report, 30 Day Post-General Report, and Annual Report (checked).

Is this Report an amendment? [] Yes [x] No Is this a Termination Report? [] Yes [x] No

Section III

STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES

Directions: If you had no contributions or expenditures during this reporting period, check the box next to the statement below, fill in the appropriate dates and sign this report.

[] I hereby certify that I have received no contributions and have made no expenditures during this reporting period from / / through / /

Section IV

SUMMARY

To reach your Calendar Year to Date figure: Add this report's Column I figures to the Column II figures of your previous report (except on line 6).

Table with 3 columns: Line Item, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand January 1, Total Contributions, Subtotal, Total Expenditures, Cash Balance at Close of Period, and Outstanding Debt to Date.

*This same figure should be entered on line 1 of all reports filed this calendar year. **You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period.

Return This Report To: Ben Ysursa, Secretary of State, PO Box 83720, Boise ID 83720-0080, phone: (208) 334-2852, fax: (208) 334-2282

Section V

CERTIFICATION

I Betsy A. Chandler, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law. Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee <u>EDHA HyAAC</u>	Report Covering the Period From <u>1/1/05</u> to <u>12/31/05</u>
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UNITEMIZED CONTRIBUTIONS

Contributions of Fifty Dollars (\$50.00) or Less This Period

Total Number 38 Total Amount \$ 920-

UNITEMIZED EXPENDITURES

Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period

Total Number 1 Total Amount \$ 19.95

	Total This Period
<u>2</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ <u>920-</u>
Itemized Contributions (total all Schedule A sheets)	\$ <u>1614-</u>
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ <u>2534-</u>
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ <u>19.95</u>
Itemized Expenditures (total all Schedule B sheets)	\$ <u>363.39</u>
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ <u>0</u>
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ <u>383.34</u>
<u>1</u> Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ <u>0</u>
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ <u>0</u>
Subtotal	= \$ <u>0</u>
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ <u>0</u>
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ <u>0</u>
<u>1</u> Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$ <u>0</u>

SCHEDULE A
ITEMIZED CONTRIBUTIONS
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee
IDHA Hy PAC

		Column A	Column B	Column C
Date/Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	1. MARGARET LONG, 355 SPOON DR POCATELLO, ID 83204	\$ <u>90-</u>	\$ _____	\$ _____
		\$ <u>90-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	2. CHRISTY FLYNN 5251 N 36th ST BOISE, ID 83703	\$ <u>68-</u>	\$ _____	\$ _____
		\$ <u>68-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	3. JAN SIMPSON 1235 PENDLEBURY BLACKFOOT, ID 83221	\$ <u>60-</u>	\$ _____	\$ _____
		\$ <u>60-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	4. SANDRA GOLAY 1796 JULIEDAN TWIN FALLS ID 83301	\$ <u>280-</u>	\$ _____	\$ _____
		\$ <u>280-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	5. SUSAN CAMERON 807 TRUMAN MOSCOW ID 83843	\$ <u>115-</u>	\$ _____	\$ _____
		\$ <u>115</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	6. JULIE STEE 321 E HIGHLANDVIEW DR BOISE, ID 83702	\$ <u>80-</u>	\$ _____	\$ _____
		\$ <u>80-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	7. BARBARA VIDINHA 1969 W NORMAN AVE COEUR D'ALENE, ID 83885	\$ <u>93-</u>	\$ _____	\$ _____
		\$ <u>93-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	8. SHARI WILLIAMS 1930 N 7th ST COEUR D'ALENE, ID 83844	\$ <u>140-</u>	\$ _____	\$ _____
		\$ <u>140-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	9. BETSY CHANDLER 29241 CANAL RD PARMA, ID 83660	\$ <u>200-</u>	\$ _____	\$ _____
		\$ <u>200-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u> <input type="checkbox"/> Primary <input type="checkbox"/> General	10. VANDA JOHNSON PO Box 701 FILER, ID 83328	\$ <u>60-</u>	\$ _____	\$ _____
		\$ <u>60-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
Subtotals of Columns A, B & C		\$ <u>1186-</u>	\$ <u>0</u>	\$ <u>0</u>
Total This Page (add columns A, B & C)		\$ <u>1186-</u>	\$ <u>0</u>	\$ <u>1186-</u>

SCHEDULE A
ITEMIZED CONTRIBUTIONS
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee
IDHA HYPAC

		Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
<u>9.17.05</u>	1. HAROLD JOHNSON PO Box 701 FILER ID 8328	\$ <u>135-</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>135-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u>	2. KATHY TULLER 4400 COCHEESWAY BOISE ID 83709	\$ <u>63-</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>63-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u>	3. CHAD HIGBEE 5150 LEONARDO POCATELLO ID 83204	\$ <u>90-</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>90-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u>	4. TALISHA HANSEN PO BOX 355 ARCO, ID 83213	\$ <u>85-</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>85-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u>9.17.05</u>	5. DAWN BOWMAN 5150 JOHNNY CREEK RD POCATELLO, ID 83204	\$ <u>55-</u>	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <u>55-</u> Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	6.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	7.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	8.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	9.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
<u> / / </u>	10.	\$ _____	\$ _____	\$ _____
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
Subtotals of Columns A, B & C		\$ <u>428-</u>	\$ <u>0</u>	\$ <u>0</u>
Total This Page (add columns A, B & C)				\$ <u>428-</u>

**SCHEDULE B
ITEMIZED EXPENDITURES**

of Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee
LDHA HyPAC

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A Cash or Check	Column B In-Kind (non-monetary)
9.17.05	1. BODY IQ 259 SHO SHONE ST TWIN FALLS, ID 83301	\$ 150-	\$ _____
Purpose of Above Expenditure: <u>YOGA INSTRUCTION</u>			
9.17.05	2. PULLOVER PRINTS 9990 W STATE ST BOISE ID 83714	\$ 213 ³⁹	\$ _____
Purpose of Above Expenditure: <u>WATER BOTTLES</u>			
/ /	3.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	4.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	5.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	6.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	7.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 363 ³⁹	\$ _____
Total This Page (add columns A & B)			\$ 363 ³⁹

SCHEDULE C-2A CONTRIBUTIONS PLEDGED BUT NOT YET RECEIVED

Name of Candidate or Committee EDHA HyAC	Report Covering the Period From 1/1/05 to 12/31/05
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Directions: Complete this schedule if you were promised and agreed to accept a contribution during this reporting period but have not actually received the money, goods or services offered before the end of the reporting period. Do not include these entries on Schedule A until you actually receive the contribution.

Line 1: Pledged Contributions of \$50.00 or Less This Period: Total Number _____ Total Amount \$ _____

Pledged Contributions of More Than \$50.00 This Period:

Pledge For	Date of Pledge	Full Name, Mailing Address and Zip Code of Contributor/Lender	Amount Pledged
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	1.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	2.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	3.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	4.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	5.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	6.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	7.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	8.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	9.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	10.	
<input type="checkbox"/> Primary <input type="checkbox"/> General	____/____/____	11.	

Line 2: Total Amount of Pledged Contributions of More Than \$50.00	\$ <u>0</u>
Line 3: Total Amount of Pledged Contributions of \$50.00 or Less (enter amount from line 1)	\$ <u>0</u>
Line 4: Total Amount of Pledged Contributions this Period (add lines 2 and 3) Also enter this total on page 2.	\$ <u>0</u>