

C-2
Rev. 04/04



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

05 OCT 10 AM 7:41
SECRETARY OF STATE
STATE OF IDAHO

Section I

Name of Candidate or Political Committee and Chairperson Idaho Chiropractic PAC		Office Sought (if candidate)	District (if any)
Mailing Address P.O. Box 1863	<input type="checkbox"/> Check if address change.	City and Zip Boise 83701	Home Phone 208-424-8344
Name of Political Treasurer Shannon Gaertner Ewing			
Mailing Address P.O. Box 1863	<input type="checkbox"/> Check if address change.	City and Zip Boise 83701	Home Phone 208-467-5904

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 06 / 03 / 06 through 08 / 30 / 06

- 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 Annual Report
- Semi-Annual Report (Statewide Candidates Only)

Is this Report an amendment? Yes No Is this a Termination Report? Yes 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. Be sure to carry forward the appropriate "Calendar Year to Date" figures in Column II, Section IV.

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).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ XXXXXX	\$ 14,865.09
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 8,638.32	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 2,225.00	\$ 6,868.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 10,863.32	\$ 20,773.09
Line 5: Total Expenditures (Enter amount from page 2)	\$ 800.00	\$ 10,889.77
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 10,063.32	\$ 10,063.32
Line 7: Outstanding Debt to Date	\$ 0.00	

*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. Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

Return This Report To:
Ben Ysursa
Secretary of State
PO Box 83720
Boise ID 83720-8088
phone: (208) 334-2852
fax: (208) 334-2282

Section V

CERTIFICATION

I, Shannon Gaertner Ewing, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Shannon Gaertner Ewing
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee Idaho Chiropractic PAC	Report Covering the Period From <u>06 / 03 / 06</u> to <u>09 / 30 / 06</u>
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>3</u>	Total Amount \$ <u>115.00</u>

UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>0</u>	Total Amount \$ <u>0.00</u>

	Total This Period
<u>4</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 115.00
Itemized Contributions (total all Schedule A sheets)	\$ 2,110.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 2,225.00
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 0.00
Itemized Expenditures (total all Schedule B sheets)	\$ 800.00
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 0.00
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 800.00
<u>0</u> Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 0.00
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$ 0.00
Subtotal	= \$ 0.00
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ 0.00
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 0.00
<u>0</u> Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$ 0.00

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

Name of Candidate or Committee
Idaho Chiropractic PAC

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Leader	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
06 / 16 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	1. Dr. Gregory Parsons 411 W. Haycraft D1 Coeur d'Alene, ID 83815	\$ 35.00	\$	\$
		\$ 175.00 <small>Calendar Year To Date</small>	\$	\$
06 / 16 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	2. Dr. Leonard Ward 122 N. State Street Preston, ID 83283	\$ 50.00	\$	\$
		\$ 200.00 <small>Calendar Year To Date</small>	\$	\$
06 / 16 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	3. Dr. Mary Jo White 606 N. Spokane St., Ste. C Post Falls, ID 83854	\$ 50.00	\$	\$
		\$ 370.00 <small>Calendar Year To Date</small>	\$	\$
07 / 17 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	4. Dr. Gregory Parsons 411 W. Haycraft D1 Coeur d'Alene, ID 83815	\$ 35.00	\$	\$
		\$ 210.00 <small>Calendar Year To Date</small>	\$	\$
07 / 17 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	5. Dr. Leonard Ward 122 N. State Street Preston, ID 83283	\$ 50.00	\$	\$
		\$ 250.00 <small>Calendar Year To Date</small>	\$	\$
07 / 17 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	6. Dr. Mary Jo White 606 N. Spokane St., Ste. C Post Falls, ID 83854	\$ 50.00	\$	\$
		\$ 420.00 <small>Calendar Year To Date</small>	\$	\$
08 / 16 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	7. Dr. Gregory Parsons 411 W. Haycraft D1 Coeur d'Alene, ID 83815	\$ 35.00	\$	\$
		\$ 245.00 <small>Calendar Year To Date</small>	\$	\$
08 / 16 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	8. Dr. Leonard Ward 122 N. State Street Preston, ID 83283	\$ 50.00	\$	\$
		\$ 300.00 <small>Calendar Year To Date</small>	\$	\$
08 / 16 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	9. Dr. Mary Jo White 606 N. Spokane St., Ste. C Post Falls, ID 83854	\$ 50.00	\$	\$
		\$ 470.00 <small>Calendar Year To Date</small>	\$	\$
Subtotals of Columns A, B & C		\$ 405.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 405.00

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

Page **2** of **4**

Name of Candidate or Committee:
Idaho Chiropractic PAC

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
08 / 28 / 06	1. Dr. Gregory Ferch 8624 Overland Rd. Boise, ID 83708	\$ 150.00	\$	\$
		<input type="checkbox"/> Primary	\$	\$
		\$ 320.00	\$	\$
		<input type="checkbox"/> General	Calendar Year To Date	Calendar Year To Date
08 / 30 / 06	2. Dr. Shannon Gaertner-Ewing P.O. Box 3306 Nampa, ID 83663	\$ 100.00	\$	\$
		<input type="checkbox"/> Primary	\$	\$
		\$ 330.00	\$	\$
		<input type="checkbox"/> General	Calendar Year To Date	Calendar Year To Date
08 / 30 / 06	3. Dr. Craig Manning 333 8th Ave. East Twin Falls, ID 83301	\$ 100.00	\$	\$
		<input type="checkbox"/> Primary	\$	\$
		\$ 224.00	\$	\$
		<input type="checkbox"/> General	Calendar Year To Date	Calendar Year To Date
08 / 30 / 06	4. Dr. David Long 497 Eastland Dr. Twin Falls, ID 83301	\$ 100.00	\$	\$
		<input type="checkbox"/> Primary	\$	\$
		\$ 100.00	\$	\$
		<input type="checkbox"/> General	Calendar Year To Date	Calendar Year To Date
09 / 01 / 06	5. Dr. Dennis Harper P.O. Box 1061 Orofino, ID 83544	\$ 150.00	\$	\$
		<input type="checkbox"/> Primary	\$	\$
		\$ 150.00	\$	\$
		<input type="checkbox"/> General	Calendar Year To Date	Calendar Year To Date
09 / 11 / 06	6. Dr. Susan Aubuchon 3316 1/2 4th St. - #4a Lewiston, ID 83501	\$ 150.00	\$	\$
		<input type="checkbox"/> Primary	\$	\$
		\$ 150.00	\$	\$
		<input type="checkbox"/> General	Calendar Year To Date	Calendar Year To Date
09 / 11 / 06	7. Dr. Dennis Harper P.O. Box 1061 Orofino, ID 83544	\$ 25.00	\$	\$
		<input type="checkbox"/> Primary	\$	\$
		\$ 175.00	\$	\$
		<input type="checkbox"/> General	Calendar Year To Date	Calendar Year To Date
09 / 15 / 06	8. Dr. Susan Aubuchon 3316 1/2 4th St. - #4a Lewiston, ID 83501	\$ 50.00	\$	\$
		<input type="checkbox"/> Primary	\$	\$
		\$ 200.00	\$	\$
		<input type="checkbox"/> General	Calendar Year To Date	Calendar Year To Date
09 / 15 / 06	9. Dr. Kurt Bailey 3510 12th St., #200 Lewiston, ID 83501	\$ 35.00	\$	\$
		<input type="checkbox"/> Primary	\$	\$
		\$ 154.00	\$	\$
		<input type="checkbox"/> General	Calendar Year To Date	Calendar Year To Date
Subtotals of Columns A, B & C		\$ 860.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 860.00

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

Name of Candidate or Committee
Idaho Chiropractic PAC

Date/Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Leader	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
09 / 15 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	1. Dr. Shannon Gaertner - Ewing P.O. Box 3306 Nampa, ID 83653	\$ 46.00	\$	\$
		\$ 375.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
09 / 15 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	2. Dr. David Long 497 Eastland Dr. Twin Falls, ID 83301	\$ 40.00	\$	\$
		\$ 140.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
09 / 15 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	3. Dr. Craig Manning 333 8th Ave. East Twin Falls, ID 83301	\$ 25.00	\$	\$
		\$ 249.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
09 / 15 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	4. Dr. Gregory Parsons 411 W. Haycraft D1 Coeur d'Alene, ID 83815	\$ 35.00	\$	\$
		\$ 280.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
09 / 15 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	5. Dr. Leonard Ward 122 N. State St. Preston, ID 83263	\$ 50.00	\$	\$
		\$ 350.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
09 / 15 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	6. Dr. Mary Jo White 606 N. Spokane St., Ste. C Post Falls, ID 83854	\$ 50.00	\$	\$
		\$ 520.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
09 / 15 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	7. Dr. Spencer G. Williams 340 Falls Avenue Twin Falls, ID	\$ 100.00	\$	\$
		\$ 100.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
09 / 15 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	8. Dr. Jessie Smith 707 N. 12th St., Ste. A Pocatello, ID 83201	\$ 100.00	\$	\$
		\$ 100.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
09 / 15 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	9. Dr. Jason West 1155 Pocatello Creek Rd., Ste. B Pocatello, ID 83201	\$ 100.00	\$	\$
		\$ 184.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ 545.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 545.00

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

Name of Candidate or Committee
Idaho Chiropractic PAC

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loan
09 / 18 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	1. Dr. Howard Arrington 153 Blue Lakes Blvd. Twin Falls, ID 83301	\$ 100.00	\$	\$
		\$ 100.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
09 / 29 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	2. Dr. James Wear 1003 7th St. South Nampa, ID 83651	\$ 100.00	\$	\$
		\$ 100.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
07 / 13 / 06 <input type="checkbox"/> Primary <input type="checkbox"/> General	3. Dr. Shawn Rudkin P.O. Box 154 Parma, ID 83660	\$ 100.00	\$	\$
		\$ 100.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	4.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	5.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	6.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	7.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	8.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	9.	\$	\$	\$
		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ 300.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 300.00

**SCHEDULE B
ITEMIZED EXPENDITURES
of Twenty-Five Dollars (\$25.00) or more this period**

Page 1 of 1

Name of Candidate or Committee
Idaho Chiropractic FAC

Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
06 / 05 / 06	1. Gino White 4930 N. Maplewood Drive Boise, ID 83703	\$ 200.00	\$
Purpose of Above Expenditure: Lobbyist			
07 / 05 / 06	2. Gino White 4930 N. Maplewood Drive Boise, ID 83703	\$ 200.00	\$
Purpose of Above Expenditure: Lobbyist			
08 / 02 / 06	3. Gino White 4930 N. Maplewood Drive Boise, ID 83703	\$ 200.00	\$
Purpose of Above Expenditure: Lobbyist			
09 / 06 / 06	4. Gino White 4930 N. Maplewood Drive Boise, ID 83703	\$ 200.00	\$
Purpose of Above Expenditure: Lobbyist			
/ /	5.	\$	\$
Purpose of Above Expenditure:			
/ /	6.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 800.00	\$ 0.00
Total This Page (add columns A & B)			\$ 800.00