



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

**Section I**

Name of Candidate or Political Committee and Chairperson <b>Tom Loertscher</b>		Office sought (if candidate) <b>Representative</b>	District (if any) <b>31B</b>
Mailing Address <b>1357 Bone Rd</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>Iona, ID 83427</b>	Home Phone <b>208-522-3072</b>
Name of Political Treasurer <b>Thomas F. Loertscher</b>		Home Phone <b>208-522-3072</b>	Work Phone <b>same</b>
Mailing Address <b>1357 Bone Rd</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>Iona, ID 83427</b>	Home Phone <b>208-522-3072</b>
		Work Phone <b>same</b>	

**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 / 2006 through 5 / 7 / 2006

- 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	\$ 786.00
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 786.00	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 4,650.00	\$ 4,650.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 5,436.00	\$ 5,436.00
Line 5: Total Expenditures (Enter amount from page 2)	\$ 221.50	\$ 221.50
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 5,214.50	\$ 5,214.50
Line 7: Outstanding Debt to Date	\$ 800.00	

\*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 Yursa  
Secretary of State  
PO Box 83720  
Boise ID 83720-0080  
phone: (208) 334-2852  
fax: (208) 334-2282

**Section V**

**CERTIFICATION**

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

*Thomas F. Loertscher*  
Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee Tom Loertscher	Report Covering the Period From <u>1 / 1 / 06</u> to <u>5 / 7 / 06</u>
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### UNITEMIZED CONTRIBUTIONS

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

Total Number 2                      Total Amount \$ 75.00

### UNITEMIZED EXPENDITURES

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

Total Number 3                      Total Amount \$ 21.50

	Total This Period
<u>2</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$ 75.00
Itemized Contributions (total all Schedule A sheets)	\$ 4,575.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 4,650.00
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 21.50
Itemized Expenditures (total all Schedule B sheets)	\$ 200.00
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 221.50
<u>1</u> Number of Schedule C-2B pages Attached	
<b>Incurred Expenditures</b>	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 800.00
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$ 800.00
Payment this Period (Total all C-2Bs - Payment this Period)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 800.00
<u>    </u> Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	
Amount Pledged this Period	\$

**SCHEDULE C-2B**  
**EXPENDITURES INCURRED (Debts and Obligations) & PAYMENT MADE ON DEBT**

Name of Candidate or Committee Tom Loertscher	Report Covering the Period From <u>1 / 1 / 06</u> to <u>5 / 7 / 06</u>
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Directions: Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service or made a payment on debt. Do not include these entries on Schedule B.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period:	Total Number _____	Total Amount \$ _____
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Expenditures Incurred (Debts and Obligations) or Payment Made on Debt of \$25.00 or More This Period:

Full Name, Mailing Address and Zip Code or Creditor	Purpose of Expenditure
1. Tom Loertscher 1357 Bone Road, Iona, ID 83427	
Outstanding Balance beginning this period.. \$ <u>800.00</u>	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ <u>800.00</u>	
2.	
Outstanding Balance beginning this period.. \$ _____	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ _____	
3.	
Outstanding Balance beginning this period.. \$ _____	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ _____	
4.	
Outstanding Balance beginning this period.. \$ _____	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ _____	
5.	
Outstanding Balance beginning this period.. \$ _____	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ _____	

Totals of this Page

Line 2: Amount Incurred This Period (Carry forward to Page 2, Under Incurred Expenditures) \$ \_\_\_\_\_

Line 3: Payment This Period (Carry forward to Page 2, under Expenditures and Incurred Expenditures) \$ \_\_\_\_\_

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

Name of Candidate or Committee  
Tom Loertscher

		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
4 / 5 / 06	1. Rep. Jim Clark 8798 N Clarkview Pl Hayden Lake, ID 83835	\$ 125.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 125.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
4 / 21 / 06	2. Idhao Healthcare PAC 802 W Bannock Boise, ID 83702	\$ 100.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 100.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
4 / 24 / 06	3. Coeur d'Alene Racing Ltd. 5100 Riverbend Ave Post Falls, ID 83854	\$ 1,000.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 1,000.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
4 / 24 / 06	4. The Idaho Committe On Hosp. & Sports PO Box 328 Bosie, ID 83701	\$ 1,000.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 1,000.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
4 / 24 / 06	5. Idaho Podiatric Medical Assoc PAC 270 N 27th St Ste B Boise, ID 83702	\$ 200.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
4 / 24 / 06	6. Amusement & Music Owners Of Idaho PO Box 140173 Garden City, ID 83714	\$ 300.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 300.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
4 / 27 / 06	7. The Children's Center 1619 Curlew Dr Ammon, ID 83406	\$ 1,000.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 1,000.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
4 / 28 / 06	8. Idabankpac State Fund PO Box 638 Boise, ID 83701	\$ 100.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 100.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
5 / 3 / 06	9. Steve & Karen Hansen 5690 W Broadway St Idaho Falls, ID 83402	\$ 200.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>
Subtotals of Columns A, B & C		\$ 4,025.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 4,025.00

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

Name of Candidate or Committee  
Tom Loertscher

		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
5 / 3 / 06	1. Employers Resource 1301 S Vista Ste 200 Boise, ID 83705	\$ 200.00	\$	\$
<input checked="" type="checkbox"/> Primary		\$ 200.00	\$	\$
<input checked="" type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5 / 3 / 06	2. Wright Investments 3870 Canterbury Way Idaho Falls, ID 83404	\$ 100.00	\$	\$
<input checked="" type="checkbox"/> Primary		\$ 100.00	\$	\$
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
5 / 3 / 06	3. Idaho Chooses Life PAC PO Box 8172 Boise, ID 83707	\$ 250.00	\$	\$
<input checked="" type="checkbox"/> Primary		\$ 250.00	\$	\$
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
/ /	4.	\$	\$	\$
<input type="checkbox"/> Primary		\$	\$	\$
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
/ /	5.	\$	\$	\$
<input type="checkbox"/> Primary		\$	\$	\$
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
/ /	6.	\$	\$	\$
<input type="checkbox"/> Primary		\$	\$	\$
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
/ /	7.	\$	\$	\$
<input type="checkbox"/> Primary		\$	\$	\$
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
/ /	8.	\$	\$	\$
<input type="checkbox"/> Primary		\$	\$	\$
<input type="checkbox"/> General		Calendar Year To Date	Calendar Year To Date	Calendar Year To Date
/ /	9.	\$	\$	\$
<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		\$ 550.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 550.00

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

Name of Candidate or Committee  
Tom Loertscher

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
5 / 1 / 06	1 Stamps.com 12959 Coral Tree Place Los Angeles, CA 90066-7020	\$ 200.00	\$ _____
Purpose of Above Expenditure: Postage			
/ /	2	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	3	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	4	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	5	\$ _____	\$ _____
Purpose of Above Expenditure:			
/ /	6	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 200.00	\$ 0.00
Total This Page (add columns A & B)			\$ 200.00