



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

C-2
Rev. 5/11

2012 OCT 12 AM 9:00
FILED

Section I

Name of Candidate or Political Committee and Chairperson <u>Idaho Optometric Physicians PAC</u>		Office Sought (if candidate)	District (if any)
Mailing Address <u>8445 N. Gov. Way</u>	City and Zip <u>Hayden 83835</u>	Home Phone	Work Phone <u>278-3208</u>
Name of Political Treasurer <u>Dr. Sorensen</u>			
Mailing Address <u>Same</u>	City and Zip	Home Phone	Work Phone

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment

This report is for the period from 6/15/12 through 10/10/12.

- 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 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 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.

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 Calendar Year*	\$ XXXXXX	\$ <u>12,664.96</u>
Line 2: Enter Beginning Cash Balance**	\$ <u>9,714.96</u>	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ <u>1,550.00</u>	\$ _____
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>11,264.96</u>	\$ _____
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ <u>6,750.00</u>	\$ _____
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ <u>4,514.96</u>	\$ _____
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ <u>0</u>	\$ _____

*This same figure should be entered on line 1 of all reports filed this calendar year.

**This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.

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

Section V

Return This Report To:
Ben Yursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
Phone: (208) 334-2852
Fax: (208) 334-2282

I, Dr. Robert Sorensen, hereby certify that the information in this
Name of Political Treasurer

report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Dr. Robert A. Sorensen
Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Idaho Optometric Physicians PAC

			Total This Period
Contributions			
①	Unitemized Contributions (\$50 and less)	# of Contributors <u>0</u>	+ \$ <u>0</u>
②	Itemized Contributions (Total of all Schedule A sheets)		+ \$ <u>1,550</u>
③	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)		+ \$ <u>—</u>
④	Loans (Total of all New Loan amounts from Schedule D sheets)		+ \$ <u>—</u>
⑤	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)		= \$ <u>1550</u>

Expenditures			
⑥	Unitemized Expenditures (Less than \$25)	# of Expenditures <u>0</u>	+ \$ <u>0</u>
⑦	Itemized Expenditures (Total of all Schedule B sheets)		+ \$ <u>6,750</u>
⑧	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)		+ \$
⑨	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)		+ \$
⑩	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)		+ \$
⑪	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)		= \$ <u>6,750</u>

Loans, Credit Cards and Debt			<u>n/a</u>
⑫	Outstanding Balance from previous reporting period		+ \$
⑬	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)		+ \$
⑭	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)		+ \$
⑮	Subtotal		= \$
⑯	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)		- \$
⑰	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)		- \$
⑱	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)		= \$

Pledged Contributions			
⑲	Unitemized Pledged Contributions (\$50 and less)	# of Pledges <u>0</u>	+ \$
⑳	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)		+ \$
㉑	Total Pledged Contributions this period		= \$

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

Name of Candidate or Committee:

Date Received	Full Name, Mailing Address and Zip Code of Contributor	Cash or Check
9/12/12 <input type="checkbox"/> Primary <input type="checkbox"/> General	1. DR. Brian Jensen 454 Hunter Ave Twin Falls ID 83301	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9/14/12 <input type="checkbox"/> Primary <input type="checkbox"/> General	2. DR Aaron Warner 408 S. Eagle Rd. Ste. # 100 Eagle ID 83616	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9/13/12 <input type="checkbox"/> Primary <input type="checkbox"/> General	3. DR. Will Fagen 1801 N 3rd St, Coeur d'Alene ID 83814	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9/13/12 <input type="checkbox"/> Primary <input type="checkbox"/> General	4. DR Shawn Sorenson 408 S. Eagle Rd. Ste. #100 Eagle ID 83616	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
12/19/11 <input type="checkbox"/> Primary <input type="checkbox"/> General	5. DR. Rod White 901 12th Ave S. Nampa ID 83651	\$ <u>150.00</u> \$ _____ Calendar Year-To-Date
12/19/11 <input type="checkbox"/> Primary <input type="checkbox"/> General	6. DR. Dan Tiller 901 12 Ave S, Nampa ID 83651	\$ <u>150.00</u> \$ _____ Calendar Year-To-Date
9/10/12 <input type="checkbox"/> Primary <input type="checkbox"/> General	7. DR Paul Hakes P.O. Box 1027 McCall ID 83638	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9/18/12 <input type="checkbox"/> Primary <input type="checkbox"/> General	8. DR. Randy Lee 700 N. Raymond St. Boise ID 83704	\$ <u>250.00</u> \$ _____ Calendar Year-To-Date
9/11/12 <input type="checkbox"/> Primary <input type="checkbox"/> General	9. DR. Brent Galvan 3421 N. Cote Rd. Boise ID 83704	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9/14/12 <input type="checkbox"/> Primary <input type="checkbox"/> General	10. DR. Steve Snapp 110 N. 1st Ave Haley ID 83333	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
Total This Page:		\$ <u>1250.00</u>

Transfer the combined total of all Schedule A pages to the Detailed Summary on page 2 line 2.

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

Name of Candidate or Committee:		
Date Received	Full Name, Mailing Address and Zip Code of Contributor	Cash or Check
9,14,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	1. DR. Robert Grill 844 Shoshone St. E, Twin Falls, ID 83301	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9,14,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	2. DR Jim Davis 2025 East 17th St. Idaho Falls, ID 83404	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9,10,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	3. DR. Kevin McElroy 50 E. Carmel Drive Meridian ID 83646	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9,10,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	4. DR Scott Taylor 1301 main st, ste. #10 Salmon ID 83467	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
5,5,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	5. DR. Gary Walker 1607 Eastland Dr. Twin Falls ID 83301	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9,19,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	6. DR. Jared Walker 1607 Eastland Dr. Twin Falls ID 83301	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
9,17,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	7. DR. Ray Greene 850 Ironwood DR, #104 Coeur d'Alene ID 83814	\$ <u>200.00</u> \$ _____ Calendar Year-To-Date
9,24,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	8. DR. Carmine Petracea 939 Bryden Ave Lewiston ID 83501	\$ <u>200.00</u> \$ _____ Calendar Year-To-Date
8,28,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	9. DR. Debra Stoenner 8445 N. Gov't Way Hayden ID 83835	\$ <u>200.00</u> \$ _____ Calendar Year-To-Date
9,17,12 <input type="checkbox"/> Primary <input type="checkbox"/> General	10. DR. Ali Heaton 8445 N. Gov't Way Hayden ID 83835	\$ <u>100.00</u> \$ _____ Calendar Year-To-Date
Total This Page:		\$ <u>1300.00</u>

Transfer the combined total of all Schedule A pages to the Detailed Summary on page 2 line 2.

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

Name of Candidate or Committee:

Purpose Codes

- | | |
|--|---|
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) | N Newspaper & Other Periodical Advertising |
| B Broadcast Advertising (Radio, TV & Internet) | O Other Advertising (Yard Signs, Buttons, etc.) |
| C Contributions to Candidates & PAC's | P Postage |
| D Donations & Gifts | S Surveys & Polls |
| E Event Expenses | T Tickets (Events) |
| F Food & Refreshments | U Utilities |
| G General Operational Expenses | W Wages, Salaries, Benefits & Bonuses |
| L Literature, Brochures, Printing | Y Petition Circulators |
| M Management Services | Z Preparation & Production of Advertising |

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
9,5,12	1. Governor C.L. "Butch" Otter Office of the Governor State Capitol PO Box 83720 Boise ID 83720	C	\$500.00
9,5,12	2. Lt. Governor Brad Little State Capitol Boise ID 83720-0057	C	\$500.00
9,5,12	3. Senator Steve Vick 5663 N Davenport street Dalton Gardens ID 83815	C	\$250.00
9,5,12	4. Senator Patti Ann Lodge 18500 Symms Road Caldwell ID 83607	C	\$250.00
9,5,12	5. Lee Heider Senator 1631 Richmond Drive Twin Falls ID 83301	C	\$250.00
9,5,12	6. Senator Les Bock P.O. Box 921 Boise ID 83701-0921	C	\$250.00
9,5,12	7. Senator Sheryl Nuxoll P.O. Box 4420 Cottonwood ID 83522	C	\$250.00
9,5,12	8. Representative Jim Guthrie 425 West Goodenough Road McCammon ID 83250	C	\$250.00
9,5,12	9. Representative Steven Thayne 5655 Hillview Road Emmett ID 83617	C	\$250.00
9,5,12	10. Representative Bob Nonini P.O. Box 83720 State Capitol Boise ID 83720	C	\$250.00
Total This Page:			\$3000.00

SCHEDULE B
ITEMIZED EXPENDITURES

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

Name of Candidate or Committee:

Purpose Codes

- | | |
|--|---|
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) | N Newspaper & Other Periodical Advertising |
| B Broadcast Advertising (Radio, TV & Internet) | O Other Advertising (Yard Signs, Buttons, etc.) |
| C Contributions to Candidates & PAC's | P Postage |
| D Donations & Gifts | S Surveys & Polls |
| E Event Expenses | T Tickets (Events) |
| F Food & Refreshments | U Utilities |
| G General Operational Expenses | W Wages, Salaries, Benefits & Bonuses |
| L Literature, Brochures, Printing | Y Petition Circulators |
| M Management Services | Z Preparation & Production of Advertising |

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
9,5,12	1. Representative Fred Wood State House - 27 B PO Box 1207 Burley ID 83318	C	\$ 250.00
9,5,12	2. Representative John Rusche P.O. Box 972 Lewiston ID 83501	C	\$ 250.00
9,5,12	3. Representative Scott Bedke P.O. Box 83720 Boise ID 83720	C	\$ 250.00
9,5,12	4. Representative Christy Perry 8791 Elkhorn Lane Nampa ID 83686	C	\$ 250.00
9,5,12	5. Representative Paul Shepherd P.O. Box 277 Riggins ID 83549	C	\$ 250.00
9,5,12	6. Representative Kathleen Sims P.O. Box 299 Coeur d'Alene ID 83816	C	\$ 250.00
9,5,12	7. Representative Kelley Packer P.O. Box 147 McCannon, ID 83250	C	\$ 250.00
9,5,12	8. Representative Paul Homrell P.O. Box 83720 Boise ID 83720	C	\$ 250.00
9,5,12	9. Representative Julie Van Orden 283 South 900 Blackfoot ID 83221	C	\$ 250.00
9,5,12	10. Representative Brandon Hixson District 10, House Seat A P.O. Box 83720 Boise ID 83720	C	\$ 250.00
Total This Page:			\$ 2,500.00

Transfer the combined total of all Schedule B pages to the Detailed Summary on page 2 line 7.

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee: _____

Purpose Codes

- | | |
|--|---|
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) | N Newspaper & Other Periodical Advertising |
| B Broadcast Advertising (Radio, TV & Internet) | O Other Advertising (Yard Signs, Buttons, etc.) |
| C Contributions to Candidates & PAC's | P Postage |
| D Donations & Gifts | S Surveys & Polls |
| E Event Expenses | T Tickets (Events) |
| F Food & Refreshments | U Utilities |
| G General Operational Expenses | W Wages, Salaries, Benefits & Bonuses |
| L Literature, Brochures, Printing | Y Petition Circulators |
| M Management Services | Z Preparation & Production of Advertising |

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
9,5,12	1. Representative Thomas Daley District 21 Position B P.O. Box 83720 Boise ID 83720	C	\$ 250. ⁰⁰
9,18,12	2. Ada County Republican Roundup Butch Otter P.O. Box 83720 Boise ID 83720	E	\$ 1000. ⁰⁰
___/___/___	3.		\$ _____
___/___/___	4.		\$ _____
___/___/___	5.		\$ _____
___/___/___	6.		\$ _____
___/___/___	7.		\$ _____
___/___/___	8.		\$ _____
___/___/___	9.		\$ _____
___/___/___	10.		\$ _____
Total This Page:			\$ 1,250. ⁰⁰

Transfer the combined total of all Schedule B pages to the Detailed Summary on page 2 line 7.