C-2

Rev. 5/11

3219



CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

(Please Print or Type)

14 DEC -4 PM 2: 15

YALDING UT STATE Section 1 Name of Candidate or Political Committee and Chairperson Office Sought (if defittibate) U i District (if any) Idaho Dental Political Action Committee NA Malling Address City and Zip Home Phone Work Phone 1220 W. Hays Street Boise 83702 208-343-7543 Name of Political Treasurer Linda Swanstrom Mailing Address City and Zip Home Phone Work Phone 1220 W. Hays Street Boise 83702 208-343-7543 Change of address for: Candidate or Political Committee Political Treasurer TYPE OF REPORT Section II This filing is an: Original Amendment This report is for the period from 10 /2014 through 11 114 /2014 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 Ø 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 COLUMN I COLUMN II figures to the Column II figures of your previous report (except on line 6). This Period Calendar Year to Date s 39,851.55 XXXXXX Line 1: Cash on Hand January 1, This Calendar Year* 49,129,18 XXXXXX Line 2: Enter Beginning Cash Balance** 19.59 **55,393.75** Line 3: Total Contributions (Enter amount from line 5, page 2) 49,148.77 95,245.30 Line 4: Subtotal (Add lines 1, 2 and 3) 42.92 46,139.45 Line 5: Total Expenditures (Enter amount from line 11, page 2) 49,105,85 49,105,85 Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4) Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) *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 Ysursa Linda Swanstrom hereby certify that the information in this Secretary of State Name of Political Treasurer PO Box 83720 report is a true, complete and correct Campaigh Financial Disclosure Report as required by law. Boise ID 83720-0080 Phone; (208) 334-2852 Fax: (208) 334-2282 han tom

Page 1

Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee; Idaho Dental Political Action Committee

		Total This Period
	Contributions	
1	Unitemized Contributions (\$50 and less) # of Contributors 1	+ \$2.09
2	Itemized Contributions (Total of all Schedule A sheets)	+ \$17.50
3	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+ \$
4	Loans (Total of all New Loan amounts from Schedule D sheets)	+ \$
(5)	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	= \$19.59

	Expenditures		
6	Unitemized Expenditures (Less than \$25) # of Expenditures	+	\$
7	Itemized Expenditures (Total of all Schedule B sheets)	+	\$42.92
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)	=	\$

	Loans, Credit Cards and Debt		
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	+ \$
Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$
Total Pledged Contributions this period	= \$

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

Page	in in
1	1

Name of Candidate or Committee:Idaho Dental Political Action Committee					
Date Received	Full Name, Mailling Address and Zip Code of Contributor	Cash or Check			
10 /21 /14	1, Zachary Brumbach 609 N Calgary Ct Ste 104 Post Falls, ID 83854-4906	\$ 17.50 \$ 325.00			
☐ General		\$ Calendar Year-To-Date			
	2.	\$			
☐ Primary ☐ General		\$Calendar Year-To-Date			
	3 .	\$			
☐ Primary ☐ General		\$Calendar Year-To-Date			
	4.	\$			
☐ Primary ☐ General		\$Calendar Year-To-Date			
	5.	\$			
☐ Primary ☐ General		\$Calendar Year-To-Date			
	6.	\$			
☐ Primary ☐ General		\$Calendar Year-To-Date			
	7.	\$			
☐ Primary ☐ General		\$Calandar Year-To-Date			
1 1	8.	\$			
☐ Primary ☐ General		SCalendar Year-To-Date			
	9.	\$			
☐ Primary ☐ General		\$Calendar Year-To-Date			
	10.	\$			
☐ Primary ☐ General		\$Calendar Year-To-Date			
	Total This Page:	\$17.50			

SCHEDULE B ITEMIZED EXPENDITURES

Page	of
1	1

Twenty-Five Dollars (\$25,00) or more this period

ame	of Candid	ate or Committee:Idaho Dental Politi	cal Action	Committee		
urpo	se Codes					
Α	All Trave	Expenses (Airfare, Fuel, Lodging & Milea	ge) N	Newspaper & Other Periodical Ad	vertising	
В	Broadcas	st Advertising (Radio, TV & Internet)	0	Other Advertising (Yard Signs, Bu	ttons, etc.)	
C	Contribut	tions to Candidates & PAC's	Р	Postage		
D	Donation	s & Gifts	\$	Surveys & Polls		
E	Event Ex	penses	T	Tickets (Events)		
F	Food & F	Refreshments	U	Utilities		
G	General	Operational Expenses	w	Wages, Salaries, Benefits & Bonu	ses	
L	Literature	, Brochures, Printing	Y	Petition Circulators		
M	Manager	nent Services	Z	Preparation & Production of Adve	rtising	
Da	te Spent	Full Name, Malling Addr	ess and Zip C	code of Recipient	Purpose Code	Cash or Check
1 (06 14	1. Marv Hagedorn 5285 W Ridgeside St Meridian, ID 83642	Check no	t cashed	С	(300.00)
		0.14			^	

Date Spent	Full Name, Malling Address and Zip Code of Recipient	Purpose Code	Cash or Check
11 06 14	1. Mary Hagedorn Check not cashed 5285 W Ridgeside St Meridian, ID 83642	С	(300.00)
11 06 14	2. Marv Hagedom 5285 W Ridgeside St Meridian, ID 83642	С	300.00
11 10 14	3. Elavon (CC Processing) One Concourse Parkway Ste 300 Atlanta, GA 30328	G	42.92 \$
	4.		\$
	5.		\$
	6.		\$
	7.		\$
	8.		\$
	9.		\$
]	10.		\$
	Total 7	This Page:	\$ ^{42.92}