



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

C-2  
Rev. 5/11

18 DEC -4 PM 2:51

**Section I**

Name of Candidate or Political Committee and Chairperson <b>Idaho Medical Political Action Committee</b>		Office Sought (if candidate) <b>OFFICE OF STATE CLERK STATE OF IDAHO</b>	District (if any)
Mailing Address <b>PO Box 2668</b>	City and Zip <b>Boise 83701</b>	Home Phone	Work Phone <b>208-344-7888</b>
Name of Political Treasurer <b>Susie Pouliot</b>			
Mailing Address <b>PO Box 2668</b>	City and Zip <b>Boise 83701</b>	Home Phone	Work Phone <b>208-344-7888</b>

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 10 / 20 / 14 through 11 / 14 / 14.

- 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	\$ 18,979.95
Line 2: Enter Beginning Cash Balance**	\$ 1,974.14	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ 1,300.15	\$ 19,282.85
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 3,274.29	\$ 38,262.80
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ 72.08	\$ 35,060.59
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ 3,202.21	\$ 3,202.21
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 Yursa  
Secretary of State  
PO Box 83720  
Boise ID 83720-0080  
Phone: (208) 334-2852  
Fax: (208) 334-2282

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

Susie Pouliot  
Signature of Political Treasurer

SCHEDULE A  
ITEMIZED CONTRIBUTIONS  
of more than Fifty Dollars (\$50.00) this period  
IDAHO MEDICAL POLITICAL ACTION COMMITTEE (IMPAC)

Date	Name	Address	City	State	Zip	Amount
10/23/2014	Rebecca Bertsch, DO	1919 Lincoln Way #110	Coeur d' Alene	ID	83814	\$150.00
10/23/2014	Kate Preston, MD	777 Hospital Way #200	Pocatello	ID	83201	\$150.00
10/23/2014	Robert Ancker, MD	9493 N Government Way	Hayden	ID	83835	\$100.00
10/23/2014	Gary Botimer, MD	13753 Locust Lane	Nampa	ID	83686	\$150.00
10/23/2014	John Faggard, MD	9 W Shingle Mill Rd	Sandpoint	ID	83864	\$150.00
10/23/2014	Daniel Judd, MD	1240 Northridge Dr	Hailey	ID	83333	\$150.00
10/23/2014	Kevin Funk, MD	5444 S Green St	Murray	UT	84123	\$150.00
10/23/2014	Kara Saperston, MD	1625 E Castlerock Ct	Boise	ID	83712	\$150.00
10/23/2014	Michael Curtin, MD	819 N 17th St	Boise	ID	83702	\$150.00
<b>Total</b>						<b>\$1,300.00</b>