

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

C-2 Rev. 5/11

13 SEP 23 AM 8: 57

Section I			The state of the s				
Name of Candidate or Political Committee and Chairperson Idaho Dental Political Action Committee	Office Sought (if candid	date) STA NA OF DAN					
Mailing Address	Home Phone	Work Phone					
1220 W. Hays Street	City and Zip Boise 83702	1	208-343-7543				
Name of Political Treasurer							
Linda Swanstrom							
Mailing Address	City and Zip Boise 83702	Home Phone	Work Phone				
1220 W. Hays Street		208-343-7543					
Change of address for: Candidate or Political Committee ☐ Political Treasurer ☐							
Section II This filing is an: ☐ Original ☑ Amenda	TYPE OF REPORT	l					
This report is for the period from $\frac{5}{\sqrt{5}}$ $\frac{\sqrt{2014}}{\sqrt{2014}}$ through $\frac{5}{\sqrt{30}}$ $\frac{\sqrt{2014}}{\sqrt{2014}}$.							
7 Day Pre-Primary Report 30 Day Post-Primary Report October 10 Pre-General Report							
☐ 7 Day Pre-General Report ☐	30 Day Post-General Re	port Annua	Report				
Semi-Annual Report (Statewide Candidates Onl	v)		DO 000				
<u> </u>	No .						
	OF NO CONTRIBUTIONS						
Directions: If you had no contributions or expenditures d Be sure to carry forward the app	luring this reporting period propriate "Calendar Year t	i, check the box next to the sta o Date" floures in Column II. S	itement below and sign this report.				
Do sale to daily forward are up	Siophiae Calonda, Tour		GCUOII IV.				
I hereby certify that I have received no c	contributions and have ma	de no expenditures during this	s reporting period.				
Section IV	SUMMARY						
To reach your Calendar Year to Date figure: Add this repo		COLUMNI	COLUMN {				
figures to the Column II figures of your previous report (ex	cept on line 6).	This Period	Calendar Year				
			to Date				
Line 1: Cash on Hand January 1, This Calendar Year*		x XXXXXX	\$ 39,851.55				
Line 2: Enter Beginning Cash Balance**	\$ 57,271.39	\$ XXXXXX					
Line 3: Total Contributions (Enter amount from line 5, page	⊋2)	\$ <u>816.08</u>	\$ 39,227.96				
Line 4: Subtotal (Add lines 1, 2 and 3)		\$ 58,087.47	\$ 79,079.51				
Line 5: Total Expenditures (Enter amount from line 11, pag	je 2)	\$ <u>147.20</u>	\$ 21,139.24				
Line 6: Enter Ending Cash Balance (Subtract line 5 from li	ne 4)	\$ <u>57,940.27</u>	\$ <u>57,940.27</u>				
Line 7: Outstanding Debt to Date (Enter amount from line	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 Swar	nstrom	harahy aorific	hat the information in this				
Secretary of State , hereby certify that the information in this Name of Political Treasurer							
PO Box 83720 Bolse ID 83720-0080 report is a true, complete and correct Campaign Financial Disclosure Report as required by law.							
Phone: (208) 334-2852							
Fax: (208) 334-2282							
Signature of Political Treasurer							

DETAILED SUMMARY

Name of Candidate or Committee: Idaho Dental Political Action Committee

		Total This Perio	d
	Contributions		
1	Unitemized Contributions (\$50 and less) # of Contributors 1	+ \$2.41	
2	Itemized Contributions (Total of all Schedule A sheets)	+ \$813.67	
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)	= \$816.08	

Expenditures	
Unitemized Expenditures (Less than \$25) # of Expenditures	+ \$
Itemized Expenditures (Total of all Schedule B sheets)	+ \$147.20
In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$
Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+ \$
Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+ \$
Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	= \$147.20

	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	
Uniternized Pledged Contributions (\$50 and less) # of Pledge	+ \$
20 Itemized Pledged Contributions this Period (Total of all Schedule F s	neets) + \$
Total Pledged Contributions this period	= \$

10.

SCHEDULE B ITEMIZED EXPENDITURES

Page of 1

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

Name of Candidate or Committee:Idaho Dental Political Action Committee

Purpo	se Codes					
Α	All Travel	all Travel Expenses (Airfare, Fuel, Lodging & Mileage) N Newspaper & Other Periodical Advertising				
В	Broadcast Advertising (Radio, TV & Internet) O Other Advertising (Yard Signs, B		ttons, etc.)			
С	Contributions to Candidates & PAC's		Ρ	Postage		
D			S	Surveys & Polls		
E	Event Expenses		Τ	Tickets (Events)		
F	·		Utilities	, ,		
G	General (Operational Expenses	W	Wages, Salaries, Benefits & Bonu	ses	
L		Brochures, Printing	Υ	Petition Circulators		
М		nent Services	Z			
Dat	e Spent	Full Name, Mailing Address and	d Zip (Code of Recipient	Purpose Code	Cash or Check
5 1	12 14	Elavon (CC Processing) One Concourse Parkway Ste 300 Atlanta, GA 30328			G	47.20 \$
4 4	13	 Idaho Democratic Legislative Caucus P.O. Box 445 Boise, ID 83701 	3		C	100.00
		3.				\$
	,	4.				¢