3272

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

C-2 14 JUN 18 PM 4: 38

				OLUME	LANT OF ST
Section I					TE OF IDAH
Name of Candidate or Political Committee and Chairperson IDAHO ASSOCIATION OF CHIROPRACTIC PHYSICIANS			Office Sought (If can	didate)	District (if any)
Mailing Address		Home Phone.		12hone	
13601 W MCMILLAN RD; STE 102-331	BOISE 83713				-424-8234
Name of Political Treasurer					
SCOTT CRAWFORD					
Mailing Address	City and Zip		Home Phone	1	Phone
1109 E PALSTON	POST FALLS	83854		208	-777-4000
Change of address for: Candidate or Political Com	nmittee 🗆 Politi	ical Treasurer			
Section II	TYPE OF REPO	ORT			
This filing is an: 🖂 Original 🔲 Amend		4.4			
This report is for the period from 05 /05 /14	_through <u>05 / 30</u>	<u> 14</u> .			
☐ 7 Day Pre-Primary Report	30 Day Post-Primary	Report	□ Octo	ber 10 Pre-Ger	eral Report
7 Day Pre-General Report		Report	Annu Annu	al Report	
Semi-Annual Report (Statewide Candidates O					
s this a Termination Report: Yes	No			1	
Section III STATEMENT	OF NO CONTRIBUTIO	NS OR EXPE	NDITURES		
Directions: If you had no contributions or expenditures				tatement below	and sign this repor
Be sure to carry forward the a	ppropriate "Calendar Yes	ar to Date" figi	ures in Column il,	Section IV:	
I hereby certify that I have received no	contributions and have	made no evni	anditurne during th	ie roportina pa	dad :
The state of the s			anditales datailà a	ile reporting be	
section IV	SUMMARY				
o reach your Calendar Year to Date figure: Add this rep	port's Column I	COLUMN I This Period		COLUMN II Calendar Year	
gures to the Column II figures of your previous report (e	ixcept on line o).	1	uis Leuod		Date
		_ 、	/vvvv	16,16	
Line 1: Cash on Hand January 1, This Calendar Year* Line 2: Enter Beginning Cash Balance**		\$ XXXXXX		Ψ	
		\$ <u>15,802.13</u>		\$ <u>XX</u>	XXXX
ine 3: Total Contributions (Enter amount from line 5, pa	\$ 0.00		\$ 5,390	.00	
			\$ 15,802,13		2.13
Line 4: Subtotal (Add lines 1, 2 and 3)			\$ 0.00		.00
Line 5: Total Expenditures (Enter amount from line 11, page 2)			ν s 15,802.13		2.13
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)		\$ 0.00		\$	
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)					
This same figure should be entered on line 1 of all repo	rts filed this calendar yes	ar.			
*This is the floure on line 6 of the last Campaign Finance	cial Disclosure Report file	ed. If this is yo	ur first report, this	amount is 0.	
lote: The closing cash balance for the current reporting	period appears on the n	ext report as t	he beginning cas	h on hand.	
Section V			T.,		
Return This Report To:	, .				
Ben Yaursa Scott Cra	wford	٠.	, hereby certify	that the inform	ation in this
Secretary of State PO Box 83720	Name of Political Treasur	-	-		
Boise ID 83720-0080 report is a true	e, complete and contact	Carypaign Fin	ancial Disclosure	Report as requ	ired by law.
Phone: (208) 334-2852		LN S	•		
Fax: (208) 334-2282	1/2-9	A.C.	ر		
·		Signatu	re of Political Tre	asurer	