

C-2 - 3301
Rev. 06/04



SCANNED

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

POSTED

Section I

Name of Candidate or Political Committee and Chairperson Idaho Health Care Assoc		Office Sought (if candidate)	District (if any) 112
Mailing Address 1524 W. Cayuse Creek Dr	City and Zip Meridian 83646	Home Phone 208-794-2995	Work Phone 208-324-9735
Name of Political Treasurer Robert Vande Merwe			
Mailing Address Same as above	City and Zip	Home Phone	Work Phone

Section II

TYPE OF REPORT

Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the instructional manual for reporting periods and due dates.

This report is for the period from 10, 1, 14 through 10, 19, 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 Report an amendment? Yes No 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, fill in the appropriate dates 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 from _____ through _____.

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 Year*	\$ <u>XXXXXX</u>	\$ <u>51983.21</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>30257.84</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>0</u>	\$ <u>263.33</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>30257.84</u>	\$ <u>52246.54</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>9200.00</u>	\$ <u>31188.70</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>21057.84</u>	\$ <u>21057.84</u>
Line 7: Outstanding Debt to Date	\$ _____	

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

**You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period.

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

Return This Report To:
Ben Ysursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
phone: (208) 334-2852
fax: (208) 334-2282

Section V

CERTIFICATION

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

RV-M
Signature of Political Treasurer

DETAILED SUMMARY PAGE

Name of Candidate or Committee Idaho Health Care Assoc	Report Covering the Period From <u>10/1/14</u> to <u>10/19/14</u>
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number _____	Total Amount \$ _____
UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number _____	Total Amount \$ _____

	Total This Period
____ Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$
Itemized Contributions (total all Schedule A sheets)	\$
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 0
____ Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$ 9200.00
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 9200.00
____ Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$
Payment this Period (Total all C-2Bs - Payment this Period)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$
____ Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$

**SCHEDULE B
 ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
Idaho Health Care Association

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10/10/14	1. Keough for Senate PO Box 101 Sandpoint ID 83864	\$ 400.00	\$ _____
Purpose of Above Expenditure:			
10/10/14	2. Thain for Senate 5655 Hillview Rd Emmett ID 83617	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10/10/14	3. Lacey for Senate 34 S. Bingham St Nampa ID 83651	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10/10/14	4. Hagadorn for Senate 5285 W. Ridgeside St Meridian ID 83646	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10/10/14	5. Martin for Senate 3672 Tumbleweed Pl Boise ID 83713	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10/10/14	6. Bayer for Senate 8020 W. Amity Boise ID 83709	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10/10/14	7. Burgoyne for Senate 2203 Mountain View Dr Boise ID 83706	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10/10/14	8. Hixon for House 910 N. Plateau Ave Caldwell ID 83605	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10/10/14	9. Perry for House 8791 Elkhorn Lane Nampa ID 83686	\$ 400.00	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 2200.00	\$ _____
Total This Page (add columns A & B)			\$ 2200.00

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

Name of Candidate or Committee

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10, 10, 14	1. Moyle for House 480 N. Plummer Rd. Star ID 83669	\$ 250.00	\$ _____
Purpose of Above Expenditure:			
10, 10, 14	2. Luker for House 514 S. El Blanco Dr Boise ID 83709	\$ 400.00	\$ _____
Purpose of Above Expenditure:			
10, 10, 14	3. Monks for House 1002 W. Washington Dr Meridian ID 83647	\$ 250.00	\$ _____
Purpose of Above Expenditure:			
10, 10, 14	4. Vander Woude for House 5311 Ridgewind Rd Nampa ID 83687	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10, 10, 14	5. King for House 2107 Palouse Boise ID 83705	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	6. Schmidt for Senate 267 Circle Dr. Moscow ID 83843	\$ 250.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	7. Souza for Senate PO Box 2223 Coeur d Alene ID 83816	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	8. Johnson for Senate PO Box 2117 Lewiston ID 83501	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	9. Nuxoll for Senate PO Box 187 Cottonwood ID 83522	\$ 250.00	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 2200.00	\$ _____
Total This Page (add columns A & B)			\$ 2200.00

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

Name of Candidate or Committee

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10, 17, 14	1. Heider for Senate 1631 Richmond Dr Twin Falls ID 83301	\$ 400.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	2. Cameron for Senate 1101 Ruby Dr Rupert ID 83350	\$ 400.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	3. Guthrie for Senate 425 W Goodenough Rd McCammon ID 83250	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	4. Lacey for Senate 13774 W Trail Creek Rd Pocatello ID 83204	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	5. Howard for Senate 1555 E. Clark St Pocatello ID 83201	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	6. Hill for Senate 1010 S. 2nd E Rexburg ID 83440	\$ 500.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	7. Malek for House 721 N. 8th St Coeur d Alene ID 83814	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	8. Stevenson for House 308 N. Prospect Blvd Lewiston ID 83501	\$ 400.00	\$ _____
Purpose of Above Expenditure:			
10, 17, 14	9. Rusche for House 405 27th Ave Lewiston, ID 83501	\$ 400.00	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 2900.00	\$ _____
Total This Page (add columns A & B)			\$ 2900.00

SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10.17.14	1. Bedke for House PO Box 89 Oakley ID 83346	\$ 500.00	\$ _____
Purpose of Above Expenditure:			
10.17.14	2. Wood for House PO Box 1207 Burley ID 83318	\$ 400.00	\$ _____
Purpose of Above Expenditure:			
10.17.14	3. Packer for House PO Box 147 McCammon ID 83250	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10.17.14	4. Horman for House 1860 Heather Circle Idaho Falls ID 83406	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10.17.14	5. Van Orden for House 425 S. 1100 W Pinegrove ID 83262	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10.17.14	6. Loertscher for House 1357 Bone Rd Tona ID 83427	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
10.17.14	7. Romrell for House 512 Park St. St. Anthony, ID 83445	\$ 200.00	\$ _____
Purpose of Above Expenditure:			
___/___/___	8.	\$ _____	\$ _____
Purpose of Above Expenditure:			
___/___/___	9.	\$ _____	\$ _____
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 1900.00	\$ _____
Total This Page (add columns A & B)			\$ 1900.00