

3212

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

C-2 Rev. 5/11

Section I		· O Chi	45 PM 12: 57
Name of Candidate or Political Committee and Chairperson		Office Sought (if cand	
Idaho Hospital Association Political Action		STATE	OF STATE
PO Box 1278	City and Zip Boise, 83701	Home Phene A I	U- Work Phone 208-338-5100
Name of Political Treasurer	100186, 03701		200-330-3100
Steven A. Millard			
Mailing Address	City and Zip	Home Phone	Work Phone
PO Box 1278	Boise, 83701	208-939-4761	208-338-5100
Change of address for: Candidate or Politic		cal Treasurer	
	TYPE OF REPO		
This report is for the period from $\frac{11}{\sqrt{15}}$	2014 through 12 /31	<u> 12014</u> ,	
7 Day Pre-Primary Report	30 Day Post-Primary F	Report 🗍 Octob	per 10 Pre-General Report
7 Day Pre-General Report	☐ 30 Day Post-General F	Report 🔳 Annu	al Report
Semi-Annual Report (Statewide Candida	ates Only)		
Is this a Termination Report:	☑ No		
Directions: If you had no contributions or expend	MENT OF NO CONTRIBUTIO ditures during this reporting per d the appropriate "Calendar Yea		tatement below and sign this report. Section IV.
☐ I hereby certify that I have recei	ved no contributions and have	made no expenditures during th	is reporting period.
Section IV	SUMMARY		
To reach your Calendar Year to Date figure: Add figures to the Column II figures of your previous re	this report's Column I	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Y	'ear*	\$ XXXXXX	\$ 47,663.91
Line 2: Enter Beginning Cash Balance**		\$ 33,507.91	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line	€ 5, page 2)	\$ 100.00	\$ 38,200.00
Line 4: Subtotal (Add lines 1, 2 and 3)		\$ 33,607.91	\$ 85,863.91
Line 5: Total Expenditures (Enter amount from line	e 11, page 2)	\$ 0.00	\$ 52,256.00
Line 6: Enter Ending Cash Balance (Subtract line	5 from line 4)	\$ 33,607.91	\$ 33,607.91
Line 7: Outstanding Debt to Date (Enter amount for	rom line 18, page 2)	\$ 0.00	
*This same figure should be entered on line 1 of a **This is the figure on line 6 of the last Campaign Note: The closing cash balance for the current rep	Financial Disclosure Report file	d. If this is your first report, this	
Section V			
Return This Report To:			
Ben Ysursa Stev	ven A. Millard	hereby certify	that the information in this
Secretary of State	Name of Political Treasure	er	and are information in this
	s a true, complete and correct (Campaign Financial Disclosure	Report as required by law.
Phone: (208) 334-2852	OA	17 7M.M. 1	,
Fax: (208) 334-2282	Vina	_G. ///llaw	
		Signature of Political Trea	asurer

DETAILED SUMMARY

Name of Candidate or Committee: Idaho Hospital Association Political Action Committee

				Total This Period
	Contributions			
1	Unitemized Contributions (\$50 and less)	# of Contributors O	+	\$0.00
2	Itemized Contributions (Total of all Schedule Asl	neets)	+	\$100.00
3	In-Kind Contributions (Total of all Contribution an	nounts from Schedule C sheets)	+	\$0.00
4	Loans (Total of all New Loan amounts from Scho	edule D sheets)	+	\$0.00
(5)	Total Contributions (Transfer this figure to page 1, Secti	ion IV, Line 3)	=	\$100.00

	Expenditures	
6	Unitemized Expenditures (Less than \$25) # of Expenditures 0	+ \$0.00
7	Itemized Expenditures (Total of all Schedule B sheets)	+ \$0.00
8	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$0.00
9	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+ \$0.00
10	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+ \$0.00
11)	Total Expenditures (Transfer this figure to page 1, Section IV, Liпе 5)	= \$0.00

	Loans, Credit Cards and Debt	
12	Outstanding Balance from previous reporting period	+ \$0.00
13	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+ \$0.00
14)	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+ \$0.00
15)	Subtotal	= \$0.00
16	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	- \$0.00
17)	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	- \$0.00
18	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	= \$0.00

	Pledged Contributions	
19	Unitemized Pledged Contributions (\$50 and less) # of Pledges 0	+ \$0.00
@ [Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$0.00
20	Total Pledged Contributions this period	= \$0.00

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

1	Page	óf
	1	1

Name of Candidate or Committee:Idaho Hospital Association Political Action Committee			
Date Received	Full Name, Mailing Address and Zip Code of Contributor	Cash or Check	
12 /17 /14	1, Robert Mueller 8810 W. River Beach Lane Garden City, ID 83714	\$ 100.00 \$ 100.00	
☐ 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		\$Calendar Year-To-Date	
	8.	\$	
☐ Primary ☐ General		\$ Calendar Year-To-Date	
, ,	9.	\$	
☐ Primary ☐ General		\$Calendar Year-To-Date	
1 1	10.	\$	
☐ Primary ☐ General		\$Calendar Year-To-Date	
	Total This Page:	\$100.00	