## CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE (Please Print or Type) 18 FEB 08 AM 11:36

C-2 Rev. 5/11

Property of 19		` ,	,	SECRETARY	OF STATE	
Section I				STATE O	F IDAHO	
Name of Candidate or Political Comm Idaho State Pharma	•	l City and Tim		Office Sought (if candid		District (if any)
Mailing Address 816 W Bannock St Ste 1	05	City and Zip Boise 83702		Home Phone 2086615199	Work P 2087	none 733566
Name of Political Treasurer Pam Eaton	<u> </u>					
Mailing Address		City and Zip		Home Phone	Work P	
816 W Bannock St Ste 1		Boise 83702			2083	420010
Section II This filing is an:  This report is for the period fro  7 Day Pre-Primary R  7 Day Pre-General R  Semi-Annual Report Is this a Termination Report:  Section III  Directions: If you had no con  Be s	Report 30  Report 30  (Statewide Candidates Only)  Yes No	TYPE OF REPORENT  Type OF REPORENT  Dugh12/31/  Day Post-Primary Report  Day Post-General Report  NO CONTRIBUTIONS  In this reporting period priate "Calendar Year to	2017. port  OR EXPE	Octobe Annua  ENDITURES e box next to the statures in Column II, S	Section IV.	and sign this report.
Section IV		SUMMARY			- Toporting poin	
To reach your Calendar Year to figures to the Column II figures		Column I		COLUMN I This Period	Calen	UMN II dar Year Date
Line 1: Cash on Hand January	1, This Calendar Year*		\$	XXXXXX	\$ <u>887.5</u>	0
Line 2: Enter Beginning Cash I	Balance**		\$_88	37.50	Ψ	(XXX
Line 3: Total Contributions (En	ter amount from line 5, page 2	)	\$_0.0	00	\$ 0.00	
Line 4: Subtotal (Add lines 1, 2	? and 3)		\$_88	37.50	\$ <u>887.5</u>	
Line 5: Total Expenditures (En	ter amount from line 11, page 2	2)	\$ <u>10</u>	00.00	\$ <u>100.0</u>	0
Line 6: Enter Ending Cash Bal	ance (Subtract line 5 from line	4)	<sub>\$_</sub> 78	37.50	\$ <u>787.5</u>	0
Line 7: Outstanding Debt to Da	ate (Enter amount from line 18	, page 2)	\$ <u>0.</u> 0	00		
*This same figure should be er **This is the figure on line 6 of Note: The closing cash balance	the last Campaign Financial D	isclosure Report filed.				
	Section V					
Return This Report To: Lawerence Denney Secretary of State PO Box 83720 Boise ID 83720-0080	, <del></del>	Eaton lame of Political Treasurer mplete and correct Ca	mpaign Fir	, hereby certify t		
Phone: (208) 334-2852 Fax: (208) 334-2282			Digi	tal Signature		

Signature of Political Treasurer

## **DETAILED SUMMARY**

## Name of Candidate or Committee: Idaho State Pharmacy Association PAC

			Total This Period
	Contributions		
1	Unitemized Contributions (\$50 and less) # of Contributors O	+	\$0.00
2	Itemized Contributions (Total of all Schedule A sheets)	+	\$0.00
3	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+	\$0.00
4	Loans (Total of all New Loan amounts from Schedule D sheets)	+	\$0.00
<b>(5)</b>	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	=	\$0.00

	Expenditures		
6	Unitemized Expenditures (Less than \$25) # of Expenditures O	+	\$0.00
7	Itemized Expenditures (Total of all Schedule B sheets)	+	\$100.00
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, Line 5)	=	\$100.00

	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 O	+ \$0.00
20	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$0.00
21)	Total Pledged Contributions this period	= \$0.00



## Schedule B Itemized Expenditures Twenty-Five Dollars(\$25.00) or more this period

Name of Candidate or Committee:	Idaho State Pharmacy Association PAC
Reporting Period:	First Annual

Date	Recipient	Amount	Code	Optional
11/20/2017	Anthon, Kelly Arthur	\$100.00	С	Explanation:
	725 E 300 S			Support:
	Burley, ID 83318			Oppose:
	<b>Grand Total:</b>	\$100.00		