CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE

19 JAN 25 PM 01:58

C-2 Rev. 5/11

(Please Print or Type)

SECRETARY OF STATE STATE OF IDAHO

Section I				
Name of Candidate or Political Committee and Chairperson			Office Sought (if cand	didate) District (if any)
Hospital Education F Mailing Address	und	City and Zip	Home Phone	
PO Box 1278		Boise 83701-1278	Tionio i nono	2083385100
Name of Political Treasurer Toni Lawson		ı		1
Mailing Address		City and Zip	Home Phone	Work Phone
PO Box 1278	ox 1278			2083385100
•	Candidate or Political Committe		easurer \square	·
-	Original Amendmen		40	
This report is for the period from	m <u>11 / 17 / 2018</u> thro	ough <u>12 / 31 / 20</u>	_	
7 Day Pre-Primary R	Report 30	Day Post-Primary Report		ber 10 Pre-General Report
7 Day Pre-General F	Report 30	Day Post-General Report	Annu	al Report
Semi-Annual Report Is this a Termination Report:	(Statewide Candidates Only) Yes No			
			eck the box next to the s	tatement below and sign this report. Section IV.
✓ I hereby cert	ify that I have received no con	tributions and have made	no expenditures during th	nis reporting period.
Section IV		SUMMARY		
To reach your Calendar Year to figures to the Column II figures			COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January	1, This Calendar Year*		\$_XXXXXX	\$ 0.00
Line 2: Enter Beginning Cash Balance**			\$_0.00	\$XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2))	\$_0.00	\$ 0.00
Line 4: Subtotal (Add lines 1, 2 and 3)			\$_0.00	\$ <u>0.00</u>
Line 5: Total Expenditures (Ent	ter amount from line 11, page 2	2)	\$_0.00	\$ <u>0.00</u>
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4		4)	\$_0.00	\$ <u>0.00</u>
Line 7: Outstanding Debt to Da	ate (Enter amount from line 18,	, page 2)	\$_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. If th		
	Section V			
Return This Report To: Lawerence Denney Secretary of State PO	ı, <u>Toni</u>	Lawson lame of Political Treasurer	, hereby certify	that the information in this
Box 83720 Boise ID 83720-0080 Phone: (208) 334-2852			ign Financial Disclosure	Report as required by law.
Fax: (208) 334-2282			Digital Signature	

Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Hospital Education Fund

		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
5	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)	+	\$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, Line 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 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