CAMPAIGN F	INANCIAL DISCLOSURE R SUMMARY PAGE (Please Print or Type)	19 JAN 28 PM 12 SECRETARY OF	STATE	C-2 Rev. 5/11
Section I		STATE OF IDA	HO	
Name of Candidate or Political Committee and Chairperson		Office Sought (if candidate)		District (if any)
Idaho Health Underwriters PAC	City and Zip	Home Phone	Work Ph	none
-	Twin Falls 83301			376413
Name of Political Treasurer Wendy Leatham		1		
Mailing Address 0	City and Zip	Home Phone	Work Ph	none
10050 W Barnsdale Dr	Boise 83704		20886	639867
☐ 7 Day Pre-General Report ☐ 30 E ☐ Semi-Annual Report (Statewide Candidates Only) Is this a Termination Report: Yes ✓ No		e box next to the statemen	rt t below a	
I hereby certify that I have received no contri Section IV To reach your Calendar Year to Date figure: Add this report's C	SUMMARY	enditures during this repor		ud. JMN II
figures to the Column II figures of your previous report (except		This Period	Calend	
Line 1: Cash on Hand January 1, This Calendar Year*	\$	XXXXXX \$	5,154.	09
Line 2: Enter Beginning Cash Balance**	\$_ 7 ,2	267.09 \$	XXX	XXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ <u>11</u>	0.00 \$	2,378.	00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>7</u> ,3	377.09 \$	7,532.	09
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ <u>24</u>	.00 \$	179.00)
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ <u>7</u> ,	353.09 \$	7,353.	09
Line 7: Outstanding Debt to Date (Enter amount from line 18, p	age 2) \$_0.0	00		
*This same figure should be entered on line 1 of all reports filed **This is the figure on line 6 of the last Campaign Financial Dis Note: The closing cash balance for the current reporting period	closure Report filed. If this is yo			
Section V Return This Report To:				
Lawerence Denney	y Leatham	, hereby certify that the	e informat	ion in this

Name of Political Treasurer

Box 83720

Boise ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282

report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Digital Signature Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Idaho Health Underwriters PAC

[Total This Period
	Contributions	
(1)	Unitemized Contributions (\$50 and less) # of Contributors 0	<u> </u>
2	Itemized Contributions (Total of all Schedule A sheets)	+ \$110.00
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)	= \$110.00

	Expenditures	
6	Unitemized Expenditures (Less than \$25) # of Expenditures 2	+ \$24.00
(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)	= \$24.00

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



Name of Candidate or Committee:	Idaho Health Underwriters PAC	
Reporting Period:	Second Annual	

Date	ElectionType	Contributor	Amount	YTDAmount
12/03/2018		Trevino, Terrie 960 Broadway Ave. 100 Boise, ID 83706	\$10.00	\$167.50
12/03/2018		Traveller, Brenda 1150 Eastland Dr N Twin Falls, ID 83301	\$10.00	\$120.00
12/03/2018		Thomas, Brett 195 River Vista PI Ste 206 Twin Falls, ID 83301	\$10.00	\$120.00
12/03/2018		Sutton, Trent 2824 Poleline Rd #A Pocatello, ID 83201	\$10.00	\$130.00
12/03/2018		Shores, Thomas E 8596 W Bolsa St Boise, ID 83709	\$10.00	\$190.00
12/03/2018		Schultz, Carolyn P.O. Box 1416 Hayden, ID 83835	\$10.00	\$120.00
12/03/2018		Pullin, Kimberlee 1150 Eastland Dr N Twin Falls, ID 83301	\$10.00	\$120.00
12/03/2018		Leavitt, Scott 12988 W Paint Dr Boise, ID 83713	\$10.00	\$127.50
12/03/2018		Heider, Ryan 195 River Vista PI Ste 206 Twin Falls, ID 83301	\$10.00	\$120.00
12/03/2018		Fiala, Colby 195 River Vista PI Ste 206 Twin Falls, ID 83301	\$10.00	\$120.00
12/03/2018		Bartholomew, Rhonda 157 River Vista Place Twin Falls, ID 83301	\$10.00	\$130.00
		Grand Total:	\$110.00	