

C-2  
Rev 04/04



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

07 JAN 31 PM  
SECRETARY OF STATE OF IDAHO

**Section I**

Name of Candidate or Political Committee and Chairperson <b>LOPAC</b>		Office Sought (if candidate)	District (if any)
Mailing Address <b>303 E. 17<sup>TH</sup> AVE., #200</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>DENVER, CO 80213</b>	Home Phone <b>303-759-0604</b>
Name of Political Treasurer <b>LAWRENCE D. ANDERSON M.D.</b>			
Mailing Address <b>8955 HACKAMORE</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>BOISE, ID 83709</b>	Home Phone <b>208-344-1996</b>
		Work Phone <b>303-822-4900</b>	Work Phone <b>208-344-3944</b>

**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 6 / 3 / 06 through 9 / 30 / 06
- 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).

	<b>COLUMN I</b> This Period	<b>COLUMN II</b> Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ <u>XXXXXX</u>	\$ <u>2264.76</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>2264.76</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>0</u>	\$ <u>0</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>2264.76</u>	\$ <u>2264.76</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>1800.00</u>	\$ <u>1800.00</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>464.76</u>	\$ <u>464.76</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 Yastras  
 Secretary of State  
 P.O. Box 83720  
 Boise ID 83720-0080  
 phone: (208) 334-2852  
 fax: (208) 334-2282

**Section V**

**CERTIFICATION**

I, LAWRENCE D. ANDERSON M.D., hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

*Lawrence D. Anderson*  
Signature of Political Treasurer

**SCHEDULE B  
ITEMIZED EXPENDITURES**

Page 1 of 7

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

Name of Candidate or Committee IOPAC			
Date	Full Name, Mailing Address and Zip Code of Recipient	Column A	Column B
		Cash or Check	In-Kind (non-monetary)
9 / 30 / 06	1. Kate Kelly PO Box 664 Boise, ID 83701	\$ 300.00	\$
Purpose of Above Expenditure: Contribution			
9 / 30 / 06	2. Margaret Henbest 8441 Plantation Lane Boise, ID 83703	\$ 300.00	\$
Purpose of Above Expenditure: Contribution			
9 / 30 / 06	3. Elliot Werk 6810 Randolph Dr. Boise, ID 83709	\$ 300.00	\$
Purpose of Above Expenditure: Contribution			
9 / 30 / 06	4. Kathie Garrett 3227 Crescent Rim Dr. Boise, ID 83706	\$ 300.00	\$
Purpose of Above Expenditure: Contribution			
9 / 30 / 06	5. Sharon Block 1093 Lakewood Dr. Town Falls, ID 83301	\$ 300.00	\$
Purpose of Above Expenditure: Contribution			
9 / 30 / 06	6. Dean Cameron 1101 Ruby Dr. Rupert, ID 83350	\$ 300.00	\$
Purpose of Above Expenditure: Contribution			
Subtotals of Columns A & B		\$ 1,800.00	\$ 0.00
Total This Page (add columns A & B)			\$ 1,800.00