

SCANNED

07 JAN 31 PM 3:30

C-2 Rev. 04/04



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

Section I

Form with fields for Name of Candidate or Political Committee and Chairperson, Office Sought, Mailing Address, City and Zip, Home Phone, Work Phone, and Name of Political Treasurer.

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 11/18/06 through 12/31/06

- Checkboxes for 7 Day Pre-Primary Report, 30 Day Post-Primary Report, October 10 Pro-General Report, 7 Day Pre-General Report, 30 Day Post-General Report, Annual Report, and Semi-Annual Report.

Is this Report an amendment? [] Yes [X] No Is this a Termination Report? [] Yes [X] 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.

[] 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).

Table with 3 columns: Description, COLUMN I This Period, and COLUMN II Calendar Year to Date. Rows include Cash on Hand, Total Contributions, Total Expenditures, and Cash Balance.

*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.

POSTED

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.

Signature of Political Treasurer

Return This Report To: Ben Ysursa, Secretary of State, PO Box 83720, Boise ID 83720-0080, phone: (208) 334-2852, fax: (208) 334-2282

From: Laurel Walsh To: Lawrence D. Anderson

Date: 1/31/2007 Time: 1:18:36 PM

**SCHEDULE B
ITEMIZED EXPENDITURES
of Twenty-Five Dollars (\$25.00) or more this period**

Page 1 of 1

Name of Candidate or Committee
IOPAC

Net
Laurel Walsh

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
12/8/06	1. Wells Fargo P.O. Box 6995 Portland, OR 97228	\$ 6.00	\$
Purpose of Above Expenditure: Bank Service Fee			
/ /	2.	\$	\$
Purpose of Above Expenditure:			
/ /	3.	\$	\$
Purpose of Above Expenditure:			
/ /	4.	\$	\$
Purpose of Above Expenditure:			
/ /	5.	\$	\$
Purpose of Above Expenditure:			
/ /	6.	\$	\$
Purpose of Above Expenditure:			
Subtotals of Columns A & B		\$ 6.00	\$ 0.00
Total This Page (add columns A & B)			\$ 6.00