	SUMMARY PAC (Please Print or Ty	pe)	C- Rev. 5/1 Rev. 5/1
Section I			DF IDAHO
Name of Candidate or Political Committee and Chairperson	•	Office Sought (if can	didate) District (if any)
Idaho State Pharmacy Association PA	City and Zip	Home Phone	Work Phone
816 W Bannock St Ste 105	Boise 83702	2086615199	2087733566
Name of Political Treasurer Pam Eaton		I	
Mailing Address	City and Zip	Home Phone	Work Phone
816 W Bannock St Ste 105	Boise 83702		2083420010
Change of address for: Candidate or Political Con	nmittee 🛛 Politica	al Treasurer	
This filing is an: ✓ Original Amend This report is for the period from <u>10</u> / <u>01</u> / <u>2014</u> 7 Day Pre-Primary Report	dment <u>1</u> through <u>10 / 19 /</u>] 30 Day Post-Primary Re		ber 10 Pre-General Report
✓ 7 Day Pre-General Report	30 Day Post-General R		al Report
Semi-Annual Report (Statewide Candidates O Is this a Termination Report: Yes			
Section III STATEMENT Directions: If you had no contributions or expenditures Be sure to carry forward the a	ppropriate "Calendar Year	d, check the box next to the s to Date" figures in Column II,	Section IV.
Section IV	SUMMARY		
To reach your Calendar Year to Date figure: Add this rep figures to the Column II figures of your previous report (e		COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Year*		\$ XXXXXX	4 007 50
LINE T. CASH ON HAND JANUARY T, THIS CARENUAR YEAR		Ψ	<u></u> \$_1,887.50
Line 2: Enter Beginning Cash Balance**		\$ <u>1,887.50</u>	\$ <u>1,887.50</u> \$ <u>XXXXXX</u>
•	ge 2)	T	
Line 2: Enter Beginning Cash Balance**	ge 2)	\$_1,887.50	\$ <u>XXXXXX</u>
Line 2: Enter Beginning Cash Balance** Line 3: Total Contributions (Enter amount from line 5, pa	- /	\$ <u>1,887.50</u> \$ <u>0.00</u>	\$ XXXXXX \$ 0.00
Line 2: Enter Beginning Cash Balance** Line 3: Total Contributions (Enter amount from line 5, pa Line 4: Subtotal (Add lines 1, 2 and 3)	age 2)	\$ <u>1,887.50</u> \$ <u>0.00</u> \$ <u>1,887.50</u>	\$ XXXXXX \$ 0.00 \$ 1,887.50 500.00
Line 2: Enter Beginning Cash Balance** Line 3: Total Contributions (Enter amount from line 5, pa Line 4: Subtotal (Add lines 1, 2 and 3) Line 5: Total Expenditures (Enter amount from line 11, pa	age 2) line 4)	\$ <u>1,887.50</u> \$ <u>0.00</u> \$ <u>1,887.50</u> \$ <u>500.00</u>	\$ XXXXXX \$ 0.00 \$ 1,887.50 \$ 500.00 4 207 50
Line 2: Enter Beginning Cash Balance** Line 3: Total Contributions (Enter amount from line 5, pa Line 4: Subtotal (Add lines 1, 2 and 3) Line 5: Total Expenditures (Enter amount from line 11, pa Line 6: Enter Ending Cash Balance (Subtract line 5 from	age 2) I line 4) e 18, page 2) rts filed this calendar year ial Disclosure Report filed	\$ <u>1,887.50</u> \$ <u>0.00</u> \$ <u>1,887.50</u> \$ <u>500.00</u> \$ <u>1,387.50</u> \$ <u>0.00</u> . If this is your first report, this	\$ XXXXXX \$ 0.00 \$ 1,887.50 \$ 500.00 \$ 1,387.50 amount is 0.

Ben Ysursa Secretary of State PO 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

, hereby certify that the information in this

Name of Political Treasurer

Pam Eaton

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DETAILED SUMMARY

Name of Candidate or Committee: Idaho State Pharmacy Association PAC

		Total This Period
	Contributions	
1	Unitemized Contributions (\$50 and less) # of Contributors 0	+ \$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 0	+	\$0.00
$\overline{7}$	Itemized Expenditures (Total of all Schedule B sheets)	+	\$500.00
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)	=	\$500.00

	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	+ \$0.00
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 State Pharmacy Association PAC
Reporting Period:	7 Day Pre-General

Date	Recipient	Amount	Code	Optional
10/06/2014	Otter, C.L. "Butch" P.O. Box 1406 Boise, ID 83701	\$500.00	С	Explanation: Support: Oppose:
	Grand Total:	\$500.00		