



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

Section I

Name of Candidate or Political Committee and Chairperson Tom Loertscher		Office Sought (if candidate) Representative	District (if any) 31 B
Mailing Address 1357 Bone Rd	<input type="checkbox"/> Check if address change.	City and Zip Iona, ID 83427	Home Phone (208) 522-3072
Name of Political Treasurer Thomas F. Loertscher			
Mailing Address 1357 Bone Rd	<input type="checkbox"/> Check if address change.	City and Zip Iona, ID 83427	Home Phone (208) 522-3072
		Work Phone Same	Work Phone Same

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 1 / 1 / 2005 through 12 / 31 / 2005

- 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).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ XXXXXX	\$ 220.76
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 220.76	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 700.00	\$ 700.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 920.76	\$ 920.76
Line 5: Total Expenditures (Enter amount from page 2)	\$ 134.76	\$ 134.76
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 786.00	\$ 786.00
Line 7: Outstanding Debt to Date	\$ 800.00	

*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 Ysursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
phone: (208) 334-2852
fax: (208) 334-2282

Section V

CERTIFICATION

I Thomas F. Loertscher, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Thomas F. Loertscher
Signature of Political Treasurer

OCT 31 11:26 AM
SECRETARY OF STATE
STATE OF IDAHO

DETAILED SUMMARY PAGE

Name of Candidate or Committee Tom Loertscher	Report Covering the Period From <u>1 / 1 / 2005</u> to <u>12 / 31 / 2006</u>
---	---

UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number _____	Total Amount \$ _____
UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>11</u>	Total Amount \$ <u>134.76</u>

	Total This Period
____ Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$
Itemized Contributions (total all Schedule A sheets)	\$ 700.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 700.00
____ Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$ 134.76
Itemized Expenditures (total all Schedule B sheets)	\$
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 134.76
<u>1</u> Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 800.00
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$ 800.00
Payment this Period (Total all C-2Bs - Payment this Period)	- \$
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 800.00
____ Number of Schedule C-2A pages Attached	
Pledged Contributions	
Amount Pledged this Period	\$

SCHEDULE A
ITEMIZED CONTRIBUTIONS
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee
Tom Loertscher

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
11 / 1 / 05	1. Idaho Dental PAC 1220 W Hays St Boise, ID 83702-5315	\$ 250.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 250.00 Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
11 / 29 / 05	2. Qwest PAC 999 Main St 11th Floor Boise, ID 83702	\$ 200.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 200.00 Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
12 / 19 / 05	3. Idaho Telecommunications PAC 1015 W Hays Boise, ID 83702	\$ 250.00	\$	\$
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		\$ 250.00 Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
/ /	4.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
/ /	5.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
/ /	6.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
/ /	7.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
/ /	8.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
/ /	9.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
Subtotals of Columns A, B & C		\$ 700.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 700.00

**SCHEDULE C-2B
EXPENDITURES INCURRED (Debts and Obligations) & PAYMENT MADE ON DEBT**

Name of Candidate or Committee Tom Loertscher	Report Covering the Period From <u>1/1/05</u> to <u>12/31/05</u>
---	---

Directions: Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service or made a payment on debt. Do not include these entries on Schedule B.

Line 1: Incurred Expenditures of Less Than \$25.00 This Period:	Total Number _____	Total Amount \$ _____
--	--------------------	-----------------------

Expenditures Incurred (Debts and Obligations) or Payment Made on Debt of \$25.00 or More This Period:

Full Name, Mailing Address and Zip Code or Creditor'	Purpose of Expenditure
1. Tom Loertscher 1357 Bone Rd, Iona, ID 83427	
Outstanding Balance beginning this period.. \$ <u>800.00</u>	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ <u>800.00</u>	
2.	
Outstanding Balance beginning this period.. \$ _____	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ _____	
3.	
Outstanding Balance beginning this period.. \$ _____	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ _____	
4.	
Outstanding Balance beginning this period.. \$ _____	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ _____	
5.	
Outstanding Balance beginning this period.. \$ _____	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ _____	Date of Payment _____
Outstanding Balance..... \$ _____	

Totals of this Page

Line 2: Amount Incurred This Period (Carry forward to Page 2, Under Incurred Expenditures) \$ _____

Line 3: Payment This Period (Carry forward to Page 2, under Expenditures and Incurred Expenditures) \$ _____