



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

06 DEC -7 AM 8:42

**Section I**

Name of Candidate or Political Committee and Chairperson <b>Tom Loertscher</b>		Office Sought (if candidate) <b>Representative</b>	District (if any) <b>STATE OF IDAHO</b>
Mailing Address <b>1357 Bone Rd</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>Iona, ID 83427</b>	Home Phone <b>208-522-3072</b>
Name of Political Treasurer <b>Thomas F. Loertscher</b>			Work Phone <b>Same</b>
Mailing Address <b>1357 Bone Rd</b>	<input type="checkbox"/> Check if address change.	City and Zip <b>Iona, ID 83427</b>	Home Phone <b>208-522-3072</b>
			Work Phone <b>Same</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 10 / 23 / 06 through 11 / 17 / 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 This Period</b>	<b>COLUMN II Calendar Year to Date</b>
Line 1: Cash on Hand January 1, This Year*	\$ XXXXXX	\$ 786.00
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ 1,860.52	\$ XXXXXX
Line 3: Total Contributions (Enter amount from page 2)	\$ 650.00	\$ 15,955.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 2,510.52	\$ 16,741.00
Line 5: Total Expenditures (Enter amount from page 2)	\$ 1,043.08	\$ 15,273.56
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ 1,467.44	\$ 1,467.44
Line 7: Outstanding Debt to Date	\$ 0.00	

\*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.

**Section V**

**CERTIFICATION**

I Thomas F. Loertscher, (name of Political Treasurer), 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

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

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <b>Tom Loertscher</b>	Report Covering the Period From <u>10 / 23 / 06</u> to <u>11 / 17 / 06</u>
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<b>UNITEMIZED CONTRIBUTIONS</b>	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number _____	Total Amount \$ _____
<b>UNITEMIZED EXPENDITURES</b>	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>8</u>	Total Amount \$ <u>65.08</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$
Itemized Contributions (total all Schedule A sheets)	\$ 650.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 650.00
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 65.08
Itemized Expenditures (total all Schedule B sheets)	\$ 378.00
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 600.00
Total Expenditures (also enter this figure on page 1, Section IV, line 5)	\$ 1,043.08
<u>1</u> Number of Schedule C-2B pages Attached	
<b>Incurred Expenditures</b>	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 600.00
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$ 600.00
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ 600.00
Total Outstanding Balance at close of this period (enter on page 1, Section IV, line 7)	= \$ 0.00
____ Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	
Amount Pledged this Period	\$

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

Name of Candidate or Committee  
Tom Loertscher

		Column A	Column B	Column C
Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Cash or Check	In-Kind (non-monetary)	Loans
11 / 8 / 06	1. Monsanto Company 800 N Lindbergh St Louis, MO 63167	\$ 250.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 250.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year to Date</small>
10 / 30 / 06	2. James P & Sylvia Dolan 16110 Crosby Cove Wayzata, MN 55391	\$ 200.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year to Date</small>
11 / 3 / 06	3. Idaho Assoc Of Nurse Anesthetists PAC Boise, ID	\$ 200.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 200.00 <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year to Date</small>
/ /	4.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year to Date</small>
/ /	5.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year to Date</small>
/ /	6.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year to Date</small>
/ /	7.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year to Date</small>
/ /	8.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year to Date</small>
/ /	9.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year To Date</small>	\$ <small>Calendar Year to Date</small>
Subtotals of Columns A, B & C		\$ 650.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 650.00

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

Name of Candidate or Committee  
Tom Loertscher

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
11 / 9 / 06	1. Julie Elsworth Campaign PO Box 668 Boise, ID 83701	\$ 300.00	\$ _____
<b>Purpose of Above Expenditure:</b> Contribution			
10 / 30 / 06	2. US Postal Service Iona, ID 83427	\$ 78.00	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	3.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	4.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	5.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
/ /	6.	\$ _____	\$ _____
<b>Purpose of Above Expenditure:</b>			
Subtotals of Columns A & B		\$ 378.00	\$ 0.00
Total This Page (add columns A & B)			\$ 378.00

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

Name of Candidate or Committee <b>Tom Loertscher</b>	Report Covering the Period From <u>10 / 23 / 06</u> to <u>11 / 17 / 07</u>
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**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.

<b>Line 1: Incurred Expenditures of Less Than \$25.00 This Period:</b>	Total Number _____	Total Amount \$ _____
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**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	Loan Repayment
Outstanding Balance beginning this period.. \$ <u>600.00</u>	
Amount Incurred this period..... \$ _____	Date Incurred _____
Payment this period..... \$ <u>600.00</u>	Date of Payment <u>11/10/2006</u>
Outstanding Balance..... \$ <u>0.00</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) \$ 600.00