



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

Section I

Name of Candidate or Political Committee and Chairperson Idaho Medical Political Action Committee		Office Sought (if Candidate)	District (if any)
Mailing Address PO Box 2668	<input type="checkbox"/> Check if address change.	City and Zip Boise 83701	Home Phone STATE Work Phone STATE OF 208-344-7888
Name of Political Treasurer Robert K Seehusen			
Mailing Address PO Box 2668	<input type="checkbox"/> Check if address change.	City and Zip Boise 83701	Home Phone STATE Work Phone 208-344-7888

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 / 1 / 06 through 10 / 22 / 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).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Year*	\$ <u>XXXXXX</u>	\$ <u>20,121.73</u>
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>21,389.09</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>9,325.00</u>	\$ <u>30,248.36</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>30,714.09</u>	\$ <u>50,370.09</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>511.80</u>	\$ <u>20,167.80</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>30,202.29</u>	\$ <u>30,202.29</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 Yursa
Secretary of State
PO Box 83720
Boise ID 83720-0080
phone: (208) 334-2852
fax: (208) 334-2282

Section V

CERTIFICATION

I Robert K. Seehusen, 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

DETAILED SUMMARY PAGE

Name of Candidate or Committee Idaho Medical Political Action Committee	Report Covering the Period From <u>10 / 01 / 06</u> to <u>10 / 22 / 06</u>
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UNITEMIZED CONTRIBUTIONS	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number <u>3</u>	Total Amount \$ <u>125.00</u>
UNITEMIZED EXPENDITURES	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number _____	Total Amount \$ _____

	Total This Period
<u>5</u> Number of Schedule A pages Attached	
Contributions	
Unitemized Contributions (\$50 and less) from top of page	\$ 125.00
Itemized Contributions (total all Schedule A sheets)	\$ 9,200.00
Total Contributions (also enter this figure on page 1, Section IV, line 3)	\$ 9,325.00
<u>1</u> Number of Schedule B pages Attached	
Expenditures	
Unitemized Expenditures (less than \$25) from top of page	\$
Itemized Expenditures (total all Schedule B sheets)	\$ 511.80
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)	\$
_____ Number of Schedule C-2B pages Attached	
Incurred Expenditures	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$
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)	= \$
_____ 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
Idaho Medical Political Action Committee

		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
10 / 02 / 06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	1. Suzanne Allen 777 N Raymond Boise, ID 83704	\$ 250.00 \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
10 / 02 / 06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2. Frederick Ambrose 980 W Ironwood Dr. #306 Coeur d'Alene, ID 83814	\$ 250.00 \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
10 / 02 / 06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	3. Barbara Bess 999 N Curtis Rd #506 Boise, ID 83706	\$ 150.00 \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
10 / 02 / 06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	4. William Binegar 301 W Myrtle St. Boise, ID 83702	\$ 250.00 \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
10 / 03 / 06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	5. Glenn Bothwell 139610 W Wainwright #A Boise, ID 83713	\$ 150.00 \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
10 / 02 / 03 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	6. Steven Boyea 320 Warner Dr. Lewiston, ID 83501	\$ 200.00 \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
10 / 02 / 06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	7. Clay Campbell 166 S 5th St. Montpelier, ID 83254	\$ 250.00 \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
10 / 02 / 06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	8. Stephen Craig 2288 N Merritt Crk Loop Coeur d'Alene, ID 83814	\$ 150.00 \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
10 / 02 / 06 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	9. Vernon Esplin 560 Memorial Dr. Pocatello, ID 83201	\$ 250.00 \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date	\$ _____ \$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ 1,900.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 1,900.00

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

Name of Candidate or Committee Idaho Medical Political Action Committee
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		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
10 / 02 / 06	1. Charles Evans 1151 Hospital Way Bldg A Pocatello, ID 83201	\$ 250.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 02 / 06	2. Timothy Flock 320 Warner Dr. Lewiston, ID 83501	\$ 500.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 02 / 06	3. Russell Griffiths 100 E Idaho St. #303 Boise, ID 83712	\$ 150.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 02 / 06	4. Dwayne Hansen PO Box 185 Rexburg, ID 83440	\$ 150.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 03 / 06	5. Leo Harf 4400 E Flamingo Ave #300 Nampa, ID 83687	\$ 150.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 02 / 03	6. David Hassinger 520 S Eagle Rd #2108 Meridian, ID 83642	\$ 500.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 02 / 06	7. John Howar 562 Shoup Ave W Twin Falls, ID 83303	\$ 150.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 02 / 06	8. Shelley Jack 1055 N Curtis Rd Boise, ID 837016	\$ 250.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>	\$ _____ <small>Calendar Year To Date</small>
10 / 02 / 06	9. Cary Jackson 500 S 11th Ave #305 Pocatello, ID 83201	\$ 200.00	\$ _____	\$ _____
<input type="checkbox"/> Primary <input checked="" 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		\$ 2,300.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 2,300.00

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

Name of Candidate or Committee
Idaho Medical Political Action Committee

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
10 / 02 / 06	1. Johanna Jensen 1615 12th Ave Rd #A Nampa, ID 83686	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10 / 09 / 06	2. William Jones 520 S Eagle Rd #3112 Meridian, ID 83642	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10 / 09 / 06	3. Kenneth Khatain 500 W Fort St Boise, ID 83702	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10 / 02 / 06	4. John Kloss 1075 N Curtis Rd #300 Boise, ID 83706	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10 / 03 / 06	5. Ronald Kristensen 1075 N Curtis Rd #300 Boise, ID 83706	\$ 500.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10 / 02 / 03	6. Marvin Kym 320 Warner Dr. Lewiston, ID 83501	\$ 250.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10 / 02 / 06	7. Ernest Lucero PO Box 898 Bonners Ferry, ID 83805	\$ 250.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
10 / 02 / 06	8. Scott Magnuson 2003 Lincoln Way #310 Coeur d'Alene, ID 83814	\$ 500.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
_____ / ____ / ____	9.	\$	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date
Subtotals of Columns A, B & C		\$ 2,100.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 2,100.00

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

Name of Candidate or Committee Idaho Medical Political Action Committee
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Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A Cash or Check	Column B In-Kind (non-monetary)	Column C Loans
10 / 06 / 06	1. Warren Miller 4400 E Flamingo Ave Nampa, ID 83687	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 09 / 06	2. Stanley Moss 520 S Eagle Rd #1201 Meridian, ID 83642	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 02 / 06	3. Brian O'Byrne 2860 Channing Way #123 Idaho Falls, ID 83404	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 09 / 06	4. Michael Thomas Rooney 428 6th Ave Lewiston, ID 83501	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 09 / 06	5. Don Schmitt 1110 Ironwood Dr. Coeru d'Alene, ID 83814	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 09 / 03	6. Charles Schneider 206 E Elm St. Caldwell, ID 83605	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 09 / 06	7. John Logan Shuss 660 Shoshone St. E #140 Twin Falls, ID 83301	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 02 / 06	8. Wendy Siegersma 215 E Hawaii Ave Nampa, ID 83686	\$ 100.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 09 / 06	9. Donald Smith 630 Addison Ave W #210 Twin Falls, ID 83301	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
Subtotals of Columns A, B & C		\$ 1,300.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 1,300.00

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

Name of Candidate or Committee
Idaho Medical Political Action Committee

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
10 / 09 / 06	1. Craig Stevens PO(Box 353 Clark Fork ID 83811	\$ 150.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 09 / 06	2. Peter Taylor 706 N College Rd #A Twin Falls, ID 83301	\$ 200.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 09 / 06	3. George Wade 1188 University Dr. Boise, ID 83706	\$ 250.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 06 / 06	4. Donald Workman 496 Shoup Ave W #D Twin Falls, ID 83301	\$ 500.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ _____ Calendar Year To Date	\$ _____ Calendar Year To Date	\$ _____ Calendar Year to Date
10 / 22 / 06	5. David Hassinger 520 S. Eagle Rd. #2108 Meridian, ID 83642	\$ 500.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 1,000.00 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		\$ 1,600.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 1,600.00

**SCHEDULE B
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee
Idaho Medical Political Action Committee

		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10 / 11 / 06	1. W.E. Watkins, M.D. 1613 12th Ave. Rd #B Nampa, ID 83686	\$ 511.80	\$ _____
Purpose of Above Expenditure: Committee Member travel reimbursement			
/ /	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		\$ 511.80	\$ 0.00
Total This Page (add columns A & B)			\$ 511.80