



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE
(Please Print or Type)

C-2
Rev. 10/07

08 FEB 19 AM 8:07

Section I

Name of Candidate or Political Committee and Chairperson: Idaho Health Care Association
Mailing Address: 802 W. Bannock, Suite 304
City and Zip: Boise 83702
Home Phone: 939-3641
Work Phone: 343-9735
Name of Political Treasurer: Robert Vande Merwe
Mailing Address: same as above

Change of address for: Candidate or Political Committee [] Political Treasurer []

Section II

TYPE OF REPORT

This filing is an: [X] Original [] Amendment
This report is for the period from 1/1/07 through 12/31/07

- [] 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 [X] Annual Report
[] Semi-Annual Report (Statewide Candidates Only)

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 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.

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, COLUMN II Calendar Year to Date. Rows include Cash on Hand, Beginning Cash Balance, Total Contributions, Subtotal, Total Expenditures, Ending Cash Balance, and Outstanding Debt.

*This same figure should be entered on line 1 of all reports filed this calendar year.

**This is the figure on line 6 of the last Campaign Financial Disclosure Report filed. If this is your first report, this amount is 0.

Note: The closing cash balance for the current reporting period appears on the next report as the beginning cash on hand.

Section V

Return This Report To: Ben Ysursa, Secretary of State, PO Box 83720, Boise ID 83720-0080

I, Robert Vande Merwe, 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

Name of Candidate or Committee: Idaho Health Care Association

| | | Total This Period |
|----------------------|--|-------------------|
| Contributions | | |
| ① | Unitemized Contributions (\$50 and less) # of Contributors <u>27</u> | + \$ 281.45 |
| ② | Itemized Contributions (Total of all Schedule A sheets) | + \$ 3,827.00 |
| ③ | In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets) | + \$ |
| ④ | Loans (Total of all New Loan amounts from Schedule D sheets) | + \$ |
| ⑤ | Total Contributions (Transfer this figure to page 1, Section IV, Line 3) | = \$ 4,108.45 |

| | | |
|---------------------|---|---------------|
| Expenditures | | |
| ⑥ | Unitemized Expenditures (\$25 and less) # of Expenditures <u>5</u> | + \$ 45.70 |
| ⑦ | Itemized Expenditures (Total of all Schedule B sheets) | + \$ 5,647.08 |
| ⑧ | In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets) | + \$ |
| ⑨ | Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets) | + \$ |
| ⑩ | Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets) | + \$ |
| ⑪ | Total Expenditures (Transfer this figure to page 1, Section IV, Line 5) | = \$ 5,692.78 |

| | | |
|-------------------------------------|---|-----------|
| Loans, Credit Cards and Debt | | |
| ⑫ | Outstanding Balance from previous reporting period | + \$ |
| ⑬ | New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets) | + \$ |
| ⑭ | New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets) | + \$ |
| ⑮ | Subtotal | = \$ 0.00 |
| ⑯ | Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets) | - \$ |
| ⑰ | Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets) | - \$ |
| 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 _____ | + \$ |
| ⑳ | Itemized Pledged Contributions this Period (Total of all Schedule F sheets) | + \$ |
| ㉑ | Total Pledged Contributions this period | = \$ 0.00 |

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

| | |
|------|----|
| Page | of |
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| Name of Candidate or Committee: <u>Idaho Health Care Association</u> | | |
|--|--|--|
| Date Received | Full Name, Mailing Address and Zip Code of Contributor | Cash or Check |
| 03 / 13 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 1. Senior Care Management 18881 Von Karman Ave., Suite 1260 Irvine, CA 92612 | \$ 200.00 \$ _____ Calendar Year-To-Date |
| 08 / 21 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 2. Neva Servin 739 E. Parkcenter Blvd Boise, ID 83706 | \$ 193.00 \$ _____ Calendar Year-To-Date |
| 06 / 26 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 3. James Roberts 8236 Waterside Ave. Nampa, ID 83687 | \$ 75.00 \$ _____ Calendar Year-To-Date |
| 06 / 07 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 4. Valley View Retirement 1130 N. Allumbaugh Boise, ID 83704 | \$ 200.00 \$ _____ Calendar Year-To-Date |
| 06 / 13 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 5. Hearts for Hospice 877 Quality Dr., Suite 201 American Fork, UT 84003 | \$ 200.00 \$ _____ Calendar Year-To-Date |
| 08 / 01 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 6. Roe & Roe Inc. PO Box 37 Homedale, ID 83628 | \$ 75.00 \$ _____ Calendar Year-To-Date |
| 7 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 7. Tari Yourzek 499 Falcon Way Cocolalla ID 83813 | \$ 75.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 8. Pamela Hartman 396 Sunset Drive Arco, ID 83213 | \$ 75.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 9. Lisa Worthington 2800 S. Bo Daniel Lane Nampa, ID 83687 | \$ 86.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 10. Nancy Reinke 520 W. Palmer Drive Nampa, ID 83686 | \$ 90.00 \$ _____ Calendar Year-To-Date |
| Total This Page: | | \$ 1,269.00 |

Transfer the combined total of all Schedule A pages to the Detailed Summary on page 2 line 2.

SCHEDULE A ITEMIZED CONTRIBUTIONS

| | |
|------|----|
| Page | of |
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of more than Fifty Dollars (\$50.00) this period

| Name of Candidate or Committee: Idaho Health Care Association | | |
|--|--|--|
| Date Received | Full Name, Mailing Address and Zip Code of Contributor | Cash or Check |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 1. Shyla Smith 8106 W. Bobran Street Boise, ID 83709 | \$ 50.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 2. Renee Naylor 3434 N. Lena Ave. Boise, ID 83713 | \$ 74.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 3. Delta Holloway 411 Cashmere Road Boise, ID 83702 | \$ 315.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 4. Monica Brutsman 9415 Galloway Road Middleton, ID 83644 | \$ 155.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 5. Martha Elliott 2266 E. 600 N St. Anthony, ID 83445 | \$ 110.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 6. Gary May 5634 W. Oreana Ct. Boise, ID 83705 | \$ 103.00 \$ _____ Calendar Year-To-Date |
| 7 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 7. Kathleen Connerley 1612 Bryden Lewiston, ID 83501 | \$ 200.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 8. Joe Frasure 2867 E. Copper Point Drive Meridian, ID 83642 | \$ 150.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 9. Bonnie Caywood 164 S. 5th St Montpelier, ID 83254 | \$ 69.00 \$ _____ Calendar Year-To-Date |
| 08 / 06 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 10. Keely Dyer 5815 Coffey Street Garden City, ID 83714 | \$ 55.00 \$ _____ Calendar Year-To-Date |
| Total This Page: | | \$ 1,281.00 |

Transfer the combined total of all Schedule A pages to the Detailed Summary on page 2 line 2.

**SCHEDULE A
ITEMIZED CONTRIBUTIONS**

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of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee: **Idaho Health Care Association**

| Date Received | Full Name, Mailing Address and Zip Code of Contributor | Cash or Check |
|--|--|--|
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 1. Dan Adamson 4978 Rainbow Lane Chubbuck, ID 83202 | \$ 157.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 2. Honey Goodman 2105 12th Ave Road Nampa, ID 83686 | \$ 212.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 3. Shauna Kraus 2303 Parke Ave Burley, ID 83318 | \$ 115.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 4. Kathy Prophet 7091 W. Emerald St Boise, ID 83704 | \$ 75.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 5. Mike Sharp 14026 W. Rochester Dr. Boise, ID 83713 | \$ 60.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 6. Rochelle Frank 660 South 2nd Street W Rexburg, ID 83440 | \$ 110.00 \$ _____ Calendar Year-To-Date |
| 7 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 7. Gary Obenauer 20595 Calhoun Ave. Caldwell, ID 83605 | \$ 83.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 8. Crae Berrett 2891 Shelly Pocatello, ID 83201 | \$ 165.00 \$ _____ Calendar Year-To-Date |
| 07 / 31 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 9. John Semingson 1204 Shriver Road Orofino, ID 83544 | \$ 75.00 \$ _____ Calendar Year-To-Date |
| 06 / 11 / 07 <input type="checkbox"/> Primary <input type="checkbox"/> General | 10. Superior Care Pharmacy 2280 W. Alexander Street Salt Lake City, UT 84119 | \$ 225.00 \$ _____ Calendar Year-To-Date |
| Total This Page: | | \$ 1,277.00 |

Transfer the combined total of all Schedule A pages to the Detailed Summary on page 2 line 2.

SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee: Idaho Health Care Association

Purpose Codes

- | | |
|---|--|
| <p>A All Travel Expenses (Airfare, Fuel, Lodging & Mileage)</p> <p>B Broadcast Advertising (Radio, TV & Internet)</p> <p>C Contributions to Candidates & PAC's</p> <p>D Donations & Gifts</p> <p>E Event Expenses</p> <p>F Food & Refreshments</p> <p>G General Operational Expenses</p> <p>L Literature, Brochures, Printing</p> <p>M Management Services</p> | <p>N Newspaper & Other Periodical Advertising</p> <p>O Other Advertising (Yard Signs, Buttons, etc.)</p> <p>P Postage</p> <p>S Surveys & Polls</p> <p>T Tickets (Events)</p> <p>U Utilities</p> <p>W Wages, Salaries, Benefits & Bonuses</p> <p>Y Petition Circulators</p> <p>Z Preparation & Production of Advertising</p> |
|---|--|

| Date Spent | Full Name, Mailing Address and Zip Code of Recipient | Purpose Code | Cash or Check |
|-------------------------|--|--------------|--------------------|
| 12 / 31 / 07 | 1. Wells Fargo Monthly Bank Charges PO Box 6995 Portland, OR 97228 | g | \$ 432.00 |
| 03 / 20 / 07 | 2. Senate Republican PAC PO Box 1556 Boise, ID 83701 | c | \$ 150.00 |
| 03 / 23 / 07 | 3. Landmark Promotions PO Box 44259 Boise, ID 83711 | e | \$ 422.83 |
| 06 / 13 / 07 | 4. Idaho Falls Group Homes PO Box 50457 Idaho Falls, ID 83405 | d | \$ 100.00 |
| 08 / 06 / 07 | 5. Warm Springs Golf Course 2495 Warm Springs Ave Boise, ID 83712 | e | \$ 3,681.00 |
| 10 / 15 / 07 | 6. B-Line Signs 8959 W. State Street Boise, ID 83714 | o | \$ 861.25 |
| / / | 7. | | \$ |
| / / | 8. | | \$ |
| / / | 9. | | \$ |
| / / | 10. | | \$ |
| Total This Page: | | | \$ 5,647.08 |

Transfer the combined total of all Schedule B pages to the Detailed Summary on page 2 line 7.