



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

C-2
Rev. 10/07

08 JAN 10 PM 3:06

Section I

Name of Candidate or Political Committee and Chairperson: Idaho Life and Health Political Action Committee
Office Sought (if candidate): STATE OF IDAHO
Mailing Address: PO Box 7777
City and Zip: Meridian 836807777
Home Phone: (208) 853-3555
Work Phone: (208) 475-0913
Name of Political Treasurer: Dennis L Johnson c/o United Heritage Life Insurance Co
Mailing Address: PO Box 7777
City and Zip: Meridian 836807777
Home Phone: (208) 853-3555
Work Phone: (208) 475-0913

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 [X] 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, and 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 to Date.

*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 Yursa, Secretary of State, PO Box 83720, Boise ID 83720-0080, Phone: (208) 334-2852, Fax: (208) 334-2282

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

Signature of Dennis L. Johnson, Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Idaho Life and Health Political Action Committee

		Total This Period
Contributions		
①	Unitemized Contributions (\$50 and less) # of Contributors _____	+ \$
②	Itemized Contributions (Total of all Schedule A sheets)	+ \$ 1,800.00
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)	= \$ 1,800.00

Expenditures		
⑥	Unitemized Expenditures (\$25 and less) # of Expenditures _____	+ \$
⑦	Itemized Expenditures (Total of all Schedule B sheets)	+ \$ 2,000.00
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)	= \$ 2,000.00

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

Name of Candidate or Committee: **Idaho Life and Health Political Action Committee**

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. United Heritage Life Insurance Company PO Box 7777 Meridian ID 83680-7777	\$ 600.00 \$ 600.00 Calendar Year-To-Date
03/26/07 <input type="checkbox"/> Primary <input type="checkbox"/> General	2. United Heritage Life Insurance Company PO Box 7777 Meridian ID 83680-7777	\$ 500.00 \$ 1,100.00 Calendar Year-To-Date
05/09/07 <input type="checkbox"/> Primary <input type="checkbox"/> General	3. United Heritage Life Insurance Company PO Box 7777 Meridian ID 83680-7777	\$ 250.00 \$ 1,350.00 Calendar Year-To-Date
09/12/07 <input type="checkbox"/> Primary <input type="checkbox"/> General	4. United Heritage Life Insurance Company PO Box 7777 Meridian ID 83680-7777	\$ 200.00 \$ 1,550.00 Calendar Year-To-Date
09/28/08 <input type="checkbox"/> Primary <input type="checkbox"/> General	5. United Heritage Life Insurance Company PO Box 7777 Meridian ID 83680-7777	\$ 250.00 \$ 1,800.00 Calendar Year-To-Date
<input type="checkbox"/> Primary <input type="checkbox"/> General	6.	\$ _____ \$ _____ Calendar Year-To-Date
<input type="checkbox"/> Primary <input type="checkbox"/> General	7.	\$ _____ \$ _____ Calendar Year-To-Date
<input type="checkbox"/> Primary <input type="checkbox"/> General	8.	\$ _____ \$ _____ Calendar Year-To-Date
<input type="checkbox"/> Primary <input type="checkbox"/> General	9.	\$ _____ \$ _____ Calendar Year-To-Date
<input type="checkbox"/> Primary <input type="checkbox"/> General	10.	\$ _____ \$ _____ Calendar Year-To-Date
<p align="right">Total This Page:</p>		<p>\$ 1,800.00</p>

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

**SCHEDULE B
ITEMIZED EXPENDITURES**

Page	of
1	1

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

Name of Candidate or Committee: **Idaho Life and Health Political Action Committee**

Purpose Codes

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

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
02/27/07	1. Idaho State House of Rep. Republican Caucus 960 Broadway, Suite 415 Boise ID 83706	C	\$ 200.00
03/13/07	2. Idaho State Senate Republican Caucus PO Box 1556 Boise ID 83701-1556	C	\$ 200.00
03/13/07	3. Idaho State House of Rep. Democratic Caucus PO Box 526 Boise ID 83701	C	\$ 200.00
03/13/07	4. Idaho State Senate Democratic Caucus PO Box 526 Boise ID 83701	C	\$ 200.00
04/02/07	5. Committee to Elect Dave Bieter PO Box 405 Boise ID 83701	C	\$ 500.00
05/18/07	6. Committee to Elect Tammy de Weerd 2621 N Miranda Meridian ID 83642	C	\$ 250.00
09/12/07	7. Committee to Elect Dave Eberle PO Box 793 Boise ID 83701	C	\$ 200.00
10/01/07	8. Committee to Elect Jim Tibbs 1109 Main Street, Suite 250 Boise ID 83702	C	\$ 250.00
	9.		\$ _____
	10.		\$ _____
Total This Page:			\$ 2,000.00

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