

CAMPAIGN FINANCIAL DISCLOSURE REPORT

C-2 Rev. 13/07

SUMMARY PAGE (Please Print or Type)

2009 JAN 12 PN 1:51

| Section I | | | |
|---|-------------------------------------|---|---------------|
| Name of Candicate or Political Committee and Chairperson IOGA PAC | | Office Sought III candidate) | |
| Mailing Address P O Box 95 | Boise ID 83701 | Home@Mobile () - () A () 208-342-1438 | 208-342-1438 |
| Name of Political Treasurer | | | |
| Jane Bruesch | | | TWO. |
| Mailing Address | City and Zip | Home Phone | Work Phone |
| P O Box 95 | Boise ID 83701 | 208-342-1438 | 208-342-1438 |
| Change of address for: Candidate or Political Committee Political Treasurer TYPE OF REPORT | | | |
| Section II TYPE OF REPORT This filing is an: Original Amendment | | | |
| | | | |
| This report is for the period from $1/1.5/08$ through $12/31/08$. | | | |
| 7 Day Pre-Primary Repor. | | | |
| | 30 Day Post-General Report | Annual Repor | t |
| Semi-Annual Report (Statewide Candidates Only) | | | |
| Is this a Termination Report: Yes X N | 0 | | |
| | | | |
| Section III STATEMENT OF NO CONTRIBUTIONS OR EXPENDITURES Directions: If you had no contributions or expenditures during this reporting paried, check the box part to the statement below and sign this report. | | | |
| 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. | | | |
| be sale to sally total a the appropriate state and to bate angules in solution in, content in | | | |
| I hereby certify that I have received no contributions and have made no expenditures during this reporting period. | | | |
| Section IV SUMMARY | | | |
| To reach your Calencar Year to Date figure: Add this repor | | COLUMNI | COLUMNII |
| figures to the Column II figures of your previous report (exc | | This Period | Calendar Year |
| | | | to Date |
| | _ | VVVVV . | 21.00 |
| Line 1: Cash on Hand January 1, This Calendar Year* | \$ | XXXXXX \$_ | 41.00 |
| Line 2: Enter Beginning Cash Balance** | : \$ | 73.00 s | XXXXXX |
| Line 3: Total Contributions (Enter amount from line 5, page | 2) \$ | 0.00 | 1,075.00 |
| Line 4: Subtotal (Add lines 1, 2 and 3) | \$ | 73.00 \$ | 1,096.00 |
| Line 5: Total Expenditures (Enter amount from line 11, page | a 2) © | -A | 1,023.00 |
| the 5. Total Experiordies (Effer amount from the 11, page | \$ | 72.00 | 72.00 |
| Line 6: Enter Ending Cash Balance (Subtract line 5 from lin | | 73.00 \$ _ | 73.00 |
| Line 7: Outstanding Debt to Date (Enter amount from line 1 | 8. page 2) \$ | | |
| *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 dosing cash balance for the current reporting pe | eriod appears on the next report as | the beginning cash on han | d. |
| Section V | | | |
| Return This Report To: | | | |
| Ben Ysursa | Jane Bruesch | | |
| Secretary of State Name of Political Treasurer Name of Political Treasurer | | | |
| PO Box 83/20 | | | |
| Boise ID 83720-0080 report is a true, complete and correct Campaign Financial Disclosure Report as required by law. | | | |
| Phone: (208) 334-2852 Fax: (208) 334-2282 | | | |
| - June success | | | |
| Signature of Political Treasurer | | | |
| / Page 1 | | | |