



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

C-2
 Rev. 10/07

10 OCT 27 PM 4:11

Section I

Name of Candidate or Political Committee and Chairperson Id Optometric Physicians PAC		Office Sought (if candidate) STATE	District (if any) DANO
Mailing Address 8445 N. Government Way	City and Zip Hayden 97335	Home Phone 762-1275	Work Phone 772-3208
Name of Political Treasurer Dr. Sorensen			
Mailing Address same	City and Zip	Home Phone	Work Phone

Change of address for: Candidate or Political Committee Political Treasurer

Section II

TYPE OF REPORT

This filing is an: Original Amendment

This report is for the period from 10/17/10 through 10/26/10

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 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).

	COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Year*	\$ XXXXXX	\$ 8,764.74
Line 2: Enter Beginning Cash Balance**	\$ 5,264.74	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ 820.00	\$ 820.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 6,064.74	\$ 6,064.74
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ 0	\$ 0
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ 6,064.74	\$ 6,064.74
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0	

*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, Dr. Sorensen, hereby certify that the information in this report is a true, complete and correct Campaign Financial Disclosure Report as required by law.

Dr. Sorensen
 Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee:

		Total This Period
Contributions		
①	Unitemized Contributions (\$50 and less) # of Contributors _____	+ \$ 0
②	Itemized Contributions (Total of all Schedule A sheets)	+ \$ 800
③	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+ \$ 0
④	Loans (Total of all New Loan amounts from Schedule D sheets)	+ \$ 0
⑤	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	= \$ 800
Expenditures		
⑥	Unitemized Expenditures (less than \$25) # of Expenditures _____	+ \$ 0
⑦	Itemized Expenditures (Total of all Schedule B sheets)	+ \$ 0
⑧	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+ \$ 0
⑨	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+ \$ 0
⑩	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+ \$ 0
⑪	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	= \$ 0
Loans, Credit Cards and Debt		
⑫	Outstanding Balance from previous reporting period	+ \$ 0
⑬	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+ \$ 0
⑭	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+ \$ 0
⑮	Subtotal	= \$ 0
⑯	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	- \$ 0
⑰	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	- \$ 0
⑱	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	= \$ 0
Pledged Contributions		
⑲	Unitemized Pledged Contributions (\$50 and less) # of Pledges _____	+ \$ 0
⑳	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$ 0
㉑	Total Pledged Contributions this period	= \$ 0

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

Name of Candidate or Committee: Id Optometrist Physicians PAC

Date Received	Full Name, Mailing Address and Zip Code of Contributor	Cash or Check
10/23/10 <input type="checkbox"/> Primary <input type="checkbox"/> General	1. Dr. Thomas Woodward 304 E. Main Emmett, Id 83617	\$ <u>100</u> \$ <u>100</u> Calendar Year-To-Date
10/23/10 <input type="checkbox"/> Primary <input type="checkbox"/> General	2. Dr. Randy Lee 700 N. Raymond St Boise, ID 83704	\$ <u>100</u> \$ <u>100</u> Calendar Year-To-Date
10/23/10 <input type="checkbox"/> Primary <input type="checkbox"/> General	3. Dr. George Paris 1205 E. 6th St Moscow, Id 83843	\$ <u>100</u> \$ <u>100</u> Calendar Year-To-Date
10/23/10 <input type="checkbox"/> Primary <input type="checkbox"/> General	4. Dr. Raymond Greene 850 Inerwood CDA, Id 83814	\$ <u>100</u> \$ <u>100</u> Calendar Year-To-Date
10/23/10 <input type="checkbox"/> Primary <input type="checkbox"/> General	5. Dr. Matt Mettrey 3419 Moonlight Dr Kimberly, Id 83341	\$ <u>100</u> \$ <u>100</u> Calendar Year-To-Date
10/23/10 <input type="checkbox"/> Primary <input type="checkbox"/> General	6. Dr. Paul Hakes PO Box 1027 McCall, Id 83638	\$ <u>100</u> \$ <u>100</u> Calendar Year-To-Date
10/23/10 <input type="checkbox"/> Primary <input type="checkbox"/> General	7. Dr. John Muto 1175 W. Boise Boise, Id 83706	\$ <u>100</u> \$ <u>100</u> Calendar Year-To-Date
10/23/10 <input type="checkbox"/> Primary <input type="checkbox"/> General	8. Dr. Debra Stoerner 19090 N. Ella Ratndrum, Id 83858	\$ <u>100</u> \$ <u>100</u> Calendar Year-To-Date
<u> </u> / <u> </u> / <u> </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	9.	\$ <u> </u> \$ <u> </u> Calendar Year-To-Date
<u> </u> / <u> </u> / <u> </u> <input type="checkbox"/> Primary <input type="checkbox"/> General	10.	\$ <u> </u> \$ <u> </u> Calendar Year-To-Date
Total This Page:		\$ <u>800</u>

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