

3236



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

C-2
Rev. 5/11

2014 DEC -4 AM 9:02

Section I

Name of Candidate or Political Committee and Chairperson: Idaho Health Underwriters PAC, Tom Shores
Mailing Address: P.O. Box 8102, Boise 83707
Home Phone: 208-321-4621
Name of Political Treasurer: Wendy Leatham
Mailing Address: 10050 W. Barnsdale Dr., Boise 83704
Home Phone: 208-323-0611, Work Phone Cell: 208-863-9867

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 10/20/14 through 11/14/14.

- [ ] 7 Day Pre-Primary Report [ ] 30 Day Post-Primary Report [ ] October 10 Pre-General Report
[ ] 7 Day Pre-General Report [X] 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).

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

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

Signature of Wendy Leatham, Signature of Political Treasurer

## DETAILED SUMMARY

Name of Candidate or Committee: Idaho Health Underwriters PAC

|                      |                                                                                  |                            | Total This Period  |
|----------------------|----------------------------------------------------------------------------------|----------------------------|--------------------|
| <b>Contributions</b> |                                                                                  |                            |                    |
| ①                    | Unitemized Contributions (\$50 and less)                                         | # of Contributors <u>7</u> | + \$ <u>46.00</u>  |
| ②                    | Itemized Contributions (Total of all Schedule A sheets)                          |                            | + \$ <u>240.00</u> |
| ③                    | In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets) |                            | + \$ <u>0</u>      |
| ④                    | Loans (Total of all New Loan amounts from Schedule D sheets)                     |                            | + \$ <u>0</u>      |
| ⑤                    | Total Contributions (Transfer this figure to page 1, Section IV, Line 3)         |                            | = \$ <u>286.00</u> |

|                     |                                                                                         |                         |                     |
|---------------------|-----------------------------------------------------------------------------------------|-------------------------|---------------------|
| <b>Expenditures</b> |                                                                                         |                         |                     |
| ⑥                   | Unitemized Expenditures (Less than \$25)                                                | # of Expenditures _____ | + \$ <u>18.00</u>   |
| ⑦                   | Itemized Expenditures (Total of all Schedule B sheets)                                  |                         | + \$ <u>2250.00</u> |
| ⑧                   | In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)          |                         | + \$ <u>0</u>       |
| ⑨                   | Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)            |                         | + \$ <u>0</u>       |
| ⑩                   | Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets) |                         | + \$ <u>0</u>       |
| ⑪                   | Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)                 |                         | = \$ <u>2268.00</u> |

|                                     |                                                                                                                                 |  |               |
|-------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|--|---------------|
| <b>Loans, Credit Cards and Debt</b> |                                                                                                                                 |  |               |
| ⑫                                   | Outstanding Balance from previous reporting period                                                                              |  | + \$ <u>0</u> |
| ⑬                                   | New Loans received during this reporting period<br>(Total of all New Loan amounts plus Accrued Interest from Schedule D sheets) |  | + \$ <u>0</u> |
| ⑭                                   | New Credit Card and Debt incurred this reporting period<br>(Total of all New Incurred Debt amounts from Schedule E sheets)      |  | + \$ <u>0</u> |
| ⑮                                   | Subtotal                                                                                                                        |  | = \$ <u>0</u> |
| ⑯                                   | Repayments of Loans made during this reporting period<br>(Total of all Loan Repayment amounts from Schedule D sheets)           |  | - \$ <u>0</u> |
| ⑰                                   | Repayments of Credit Card and Debt this reporting period<br>(Total of all Debt Repayment amounts from Schedule E sheets)        |  | - \$ <u>0</u> |
| ⑱                                   | Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)                          |  | = \$ <u>0</u> |

|                              |                                                                             |                    |               |
|------------------------------|-----------------------------------------------------------------------------|--------------------|---------------|
| <b>Pledged Contributions</b> |                                                                             |                    |               |
| ⑲                            | Unitemized Pledged Contributions (\$50 and less)                            | # of Pledges _____ | + \$ <u>0</u> |
| ⑳                            | Itemized Pledged Contributions this Period (Total of all Schedule F sheets) |                    | + \$ <u>0</u> |
| ㉑                            | Total Pledged Contributions this period                                     |                    | = \$ <u>0</u> |

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

Name of Candidate or Committee: Idaho Health Underwriters PAC

| Date Received                                                                               | Full Name, Mailing Address and Zip Code of Contributor                 | Cash or Check                                                           |
|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------|-------------------------------------------------------------------------|
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 1. Ann Bell<br>2171 Pebblecreek Ln.<br>Boise, Id 83706                 | \$ 15. <sup>00</sup><br>\$ 165. <sup>00</sup><br>Calendar Year-To-Date  |
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 2. Dana Drake<br>1401 E. Sherman Ave.<br>Coeur d'Alene, Id 83814       | \$ 10. <sup>00</sup><br>\$ 215. <sup>00</sup><br>Calendar Year-To-Date  |
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 3. Colby Fiala<br>195 River Vista pl. # 206<br>Twin Falls, Id 83301    | \$ 10. <sup>00</sup><br>\$ 110. <sup>00</sup><br>Calendar Year-To-Date  |
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 4. Ryan Heider<br>195 River Vista pl. # 206<br>Twin Falls, Id 83301    | \$ 10. <sup>00</sup><br>\$ 70. <sup>00</sup><br>Calendar Year-To-Date   |
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 5. Scott Leavitt<br>12988 W. Paint Dr.<br>Boise, Id 83713              | \$ 10. <sup>00</sup><br>\$ 110. <sup>00</sup><br>Calendar Year-To-Date  |
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 6. Kimberlee Pullin<br>1150 Eastland Dr. North<br>Twin Falls, Id 83301 | \$ 10. <sup>00</sup><br>\$ 110. <sup>00</sup><br>Calendar Year-To-Date  |
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 7. Carolyn Schutz<br>P.O. Box 1416<br>Hayden, Id 83835                 | \$ 10. <sup>00</sup><br>\$ 110. <sup>00</sup><br>Calendar Year-To-Date  |
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 8. Tom Shores<br>8596 W. Balsa Ct.<br>Boise, Id 83709                  | \$ 120. <sup>00</sup><br>\$ 256. <sup>50</sup><br>Calendar Year-To-Date |
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 9. Trent Sutton<br>2824 Poleline Rd. #A<br>Pocatello, Id 83201         | \$ 10. <sup>00</sup><br>\$ 112. <sup>50</sup><br>Calendar Year-To-Date  |
| 11/03/14<br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 10. Brenda Traveller<br>1150 Eastland Dr. N.<br>Twin Falls, Id 83301   | \$ 10. <sup>00</sup><br>\$ 110. <sup>00</sup><br>Calendar Year-To-Date  |
| Total This Page:                                                                            |                                                                        | \$ 215. <sup>00</sup>                                                   |

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

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

Name of Candidate or Committee: Idaho Health Underwriters PAC

| Date Received                                                                                      | Full Name, Mailing Address and Zip Code of Contributor                                   | Cash or Check                                                |
|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| <u>11/03/14</u><br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 1. <u>Terrie Trevino</u><br><u>P.O. Box 7408</u><br><u>Boise, Id 83707</u>               | \$ <u>15.00</u><br>\$ <u>125.00</u><br>Calendar Year-To-Date |
| <u>11/03/14</u><br><input type="checkbox"/> Primary<br><input checked="" type="checkbox"/> General | 2. <u>David Wilcox</u><br><u>195 River Vista pl. #200</u><br><u>Twin Falls, Id 83301</u> | \$ <u>10.00</u><br>\$ <u>110.00</u><br>Calendar Year-To-Date |
| <u> / / </u><br><input type="checkbox"/> Primary<br><input type="checkbox"/> General               | 3.                                                                                       | \$ _____<br>\$ _____<br>Calendar Year-To-Date                |
| <u> / / </u><br><input type="checkbox"/> Primary<br><input type="checkbox"/> General               | 4.                                                                                       | \$ _____<br>\$ _____<br>Calendar Year-To-Date                |
| <u> / / </u><br><input type="checkbox"/> Primary<br><input type="checkbox"/> General               | 5.                                                                                       | \$ _____<br>\$ _____<br>Calendar Year-To-Date                |
| <u> / / </u><br><input type="checkbox"/> Primary<br><input type="checkbox"/> General               | 6.                                                                                       | \$ _____<br>\$ _____<br>Calendar Year-To-Date                |
| <u> / / </u><br><input type="checkbox"/> Primary<br><input type="checkbox"/> General               | 7.                                                                                       | \$ _____<br>\$ _____<br>Calendar Year-To-Date                |
| <u> / / </u><br><input type="checkbox"/> Primary<br><input type="checkbox"/> General               | 8.                                                                                       | \$ _____<br>\$ _____<br>Calendar Year-To-Date                |
| <u> / / </u><br><input type="checkbox"/> Primary<br><input type="checkbox"/> General               | 9.                                                                                       | \$ _____<br>\$ _____<br>Calendar Year-To-Date                |
| <u> / / </u><br><input type="checkbox"/> Primary<br><input type="checkbox"/> General               | 10.                                                                                      | \$ _____<br>\$ _____<br>Calendar Year-To-Date                |
| Total This Page:                                                                                   |                                                                                          | \$ <u>25.00</u>                                              |

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

**SCHEDULE B**  
**ITEMIZED EXPENDITURES**  
 Twenty-Five Dollars (\$25.00) or more this period

Name of Candidate or Committee: Idaho Health Underwriters PAC

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                |
|-------------------------|----------------------------------------------------------------------------|--------------|------------------------------|
| 10/30/14                | 1. Offer for Idaho<br>P.O. Box 1406<br>Boise, Id 83701                     | C            | \$ 500. <sup>00</sup>        |
| 10/30/14                | 2. Reelect Rep. Steve Miller<br>1208 East 200 North<br>Fairfield, Id 83327 | C            | \$ 250. <sup>00</sup>        |
| 10/30/14                | 3. Luke Malek for Idaho<br>P.O. Box 1379<br>Coeur d'Alene, Id 83814        | C            | \$ 250. <sup>00</sup>        |
| 10/30/14                | 4. Bedke for Legislature<br>P.O. Box 89<br>Oakley, Id 83346                | C            | \$ 250. <sup>00</sup>        |
| 10/30/14                | 5. Comm. to elect Brent Hill<br>1010 S. 2nd E.<br>Rexburg, Id 83440        | C            | \$ 250. <sup>00</sup>        |
| 10/30/14                | 6. John Rusche for Idaho<br>P.O. Box 942<br>Lewiston, Id 83501             | C            | \$ 250. <sup>00</sup>        |
| 10/30/14                | 7. Comm. to elect Kelley Packer<br>P.O. Box 147<br>McCammon, Id 83250      | C            | \$ 250. <sup>00</sup>        |
| 10/30/14                | 8. Comm. to elect Senator Cameron<br>1101 Ruby Dr.<br>Rupert, Id 83350     | C            | \$ 250. <sup>00</sup>        |
| _ _ _                   | 9.                                                                         |              | \$ _____                     |
| _ _ _                   | 10.                                                                        |              | \$ _____                     |
| <b>Total This Page:</b> |                                                                            |              | <b>\$ 2250.<sup>00</sup></b> |