

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

Rev. 12/14

Section I	N FINANCIAL DISCLOSURE F SUMMARY PAGE (Please Print or Type)	REPORT J	C-2 Rev. 12/14
Name of Candidate or Political Committee and Chairperson  Idaho Health Care Associa	tton	Office Sought (if candidate)	District (if an)
Mailing Address 1524 W. Cayuse Creck Drive	City and Zip	Home Phone	Work Phone
Name of Political Treasurer	1161 1010 1 00041	0 208- 177-078	5 208-343-9735
Robert Vande Merwe.  Mailing Address	City and Zip	Home Phone	Work Phone
Same as above			
Change of address for: Candidate or Political Commit	tee Political Treasure	er 🗆	
Section II This filing is an:			
This report is for the period from _OI / OI /2015 th	ough <u>/2 / 3/ / 20/5</u>		
☐ 7 Day Pre-Primary Report ☐ 3	0 Day Post-Primary Report	☐ October 10	Pre-General Report
☐ 7 Day Pre-General Report ☐ 3	0 Day Post-General Report	💢 Annual Rep	oort
☐ Semi-Annual Report (Statewide Candidates Only) Is this a Termination Report: ☐ Yes   No.			
Section III STATEMENT OF Directions: If you had no contributions or expenditures dur Be sure to carry forward the appre	NO CONTRIBUTIONS OR EXP ing this reporting period, check to opriate "Calendar Year to Date" fi	ne box next to the stateme	ent below and sign this report. n IV.
☐ I hereby certify that I have received no con	ntributions and have made no ex	penditures during this repo	orting period.
Section IV	SUMMARY		
To reach your Calendar Year to Date figure: Add this report' figures to the Column II figures of your previous report (exce		COLUMN I This Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This Calendar Year*	\$	XXXXXX \$	41,431.11
Line 2: Enter Beginning Cash Balance**	ः	1.431.11 \$	XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2	s <u>)</u> :	3,750,00 s	B.750.0D
Line 4: Subtotal (Add lines 1, 2 and 3)	\$_ <b>5</b>	55,18L11 \$	
Line 5: Total Expenditures (Enter amount from line 11, page	2) \$	6,566.06 \$	6.566.06
Line 6: Enter Ending Cash Balance (Subtract line 5 from line			48,615.05
Line 7: Outstanding Debt to Date (Enter amount from line 18	_	·	<u> </u>
*This same figure should be entered on line 1 of all reports f **This is the figure on line 6 of the last Campaign Financial I Note: The closing cash balance for the current reporting peri	Disclosure Report filed. If this is y	our first report, this amour the beginning cash on ha	nt is 0. nd.

Section V

Return This Report To: Secretary of State PO Box 83720 Boise ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282

I, Pobert Vande Merwe, hereby certify that the information in this Name of Political Treasurer

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

			Tota	al This Period
Contributions				
Unitemized Contributions (\$50 and less)	# of Contributors	+	\$	
Itemized Contributions (Total of all Schedule A	sheets)	+	\$	12
In-Kind Contributions (Total of all Contribution a	amounts from Schedule C sheets)	+	\$	01/50.0
Loans (Total of all New Loan amounts from Sc	hedule D sheets)	. +	<u>\$</u>	
Total Contributions (Transfer this figure to page 1, Sec	ction IV, Line 3)		<b>\$</b>	

	Expenditures		
6	Unitemized Expenditures (Less than \$25) # of Expenditures	+	\$
7	Itemized Expenditures (Total of all Schedule B sheets)	+	\$ 456606
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)	=	\$

	ans, Credit Cards and Debt		nla
2	Outstanding Balance from previous reporting period	+	Ś
3	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+	\$
4)	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+	\$ .
5)	Subtotal	-	\$
6	Repayments of Loans made during this reporting period  (Total of all Loan Repayment amounts from Schedule D sheets)	-	\$
	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	-	\$
8 Tota	al Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	=	\$

	Pledged Contributions		
19	Unitemized Pledged Contributions (\$50 and less) # of Pledges	+	\$
20	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+	\$ 2000.00
(21)	Total Pledged Contributions this period	=	\$

General

Clearwater Care Cntrs. Inc.

Invoice

3/18/15 1610

#### Idaho Health Care Association 2015 PAC Donations Paid

January through December 2015



Primary/ General Schedule A Type Date Num Name Address Paid **Amount** PO Box 281 General Alpine Manor II Invoice 2/3/15 744 Kimberly, ID 83341 Paid \$ 50.00 PO Box 838 General **Ashton Living Cntr** Invoice Ashton, ID 83420 2/25/15 1397 Paid \$ 250.00 PO Box 838 General Invoice 12/22/15 5793 Ashton, ID 83420 Paid \$ 250.00 **Aspen Transitional** 2867 E. Copper Point Dr. Rehabilitation General Invoice 1/12/15 324 Meridian, ID 83642 Paid \$ 250.00 2867 E. Copper Point Dr. General Invoice 11/21/15 5474 Meridian, ID 83642 Paid \$ 250.00 12553 W. Explorer Dr. #190 General **Aspire Human Services** Invoice 7/14/15 4431 Boise, ID 83713-1553 Paid \$ 250.00 924 Christian Wy Autumn Haven of Rupert General Invoice 2/25/15 1384 Rupert, ID 83350 Paid \$ 250.00 855 Boise St. General Bear Lake Manor AL Invoice 1/15/15 409 Montpelier, ID 83254 Paid \$ 250.00 1220 Montana St. **Bennett Hills Center** General Invoice Gooding, ID 83330 1/28/15 658 Paid 250.00 PO Box 4243 **Boise Group Homes** General 2/22/15 1304 Invoice Boise, ID 83711 Paid \$ 250.00 Brookdale P O Box 3133 General **Brookdale Lewiston** Invoice 3/17/15 1578 Milwaukee, WI 53201 Paid 250.00 **Caribou Memorial Living** 300 South 3rd West Center General Invoice Soda Springs, ID 83276 12/9/15 5587 Paid 100.00

1411 Falls Ave. E., Ste. 703

Paid

\$

Twin Falls, ID 83301

250.00

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**January through December 2015** 

Primary/ General	Schedule A	Туре	Date	Num	Name Address	Paid		Amount
General General	CommuniCare, Inc	Invoice	1/1/15 12/8/15	5529	40 W. Franklin Rd., Ste. F Meridian, ID 83642 40 W. Franklin Rd., Ste. F Meridian, ID 83642	Paid Paid	\$	250.00 250.00
General	Copper Summit	Invoice	6/15/15	2805	2424 Birdie Thompson Pocatello, ID 83201	Paid	\$	250.00
General	Desano Place Facilities	Invoice	12/13/15	5632	50 W 620 N Shoshone, ID 83352	Paid	\$	100.00
General General	Developmental Options	Invoice Invoice	3/18/15 12/10/15		415 South Arthur Ave Pocatello, ID 83204 415 South Arthur Ave Pocatello, ID 83204	Paid Paid	\$ \$	250.00 100.00
General	Discovery Care Center of Salmon-SNF	Invoice	2/22/15	1310	600 Shanafelt St. Salmon, ID 83467	Paid	\$	250.00
General	Eastern idaho RMC TCU	Invoice	2/5/15	819	PO Box 2077 Idaho Falls, ID 83403	Paid	\$	250.00
General	Emerson House at River Pointe	Invoice	2/11/15	1064	8250 W. Marigold Street Garden City, ID: 83714	Paid	\$	250.00
General	Evergreen Place Assisted Living	Invoice	3/18/15	1625	1043 Burley Avenue Buhl, ID 83316	Paid	\$	250.00
General	Grangeville Health/Rehab	Invoice	7/11/15	4310	410 E N 2nd St. Grangeville, ID 83530	Paid	\$	250.00
General	Guardian Angel Homes-Lew	Invoice	2/2/15	698	2421 Vineyard Ave. Lewiston, ID 83501	Paid	\$	250.00
General	Harmony House Assisted Living I	Invoice	1/12/15	343	PO Box 2792 Hayden, ID 83835	Paid	\$	250.00

**January through December 2015** 

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	Primary/							γ,		
	General	Schedule A	Туре	Date	Num	Name Address	Paid		Amount	
	General	Harmony House Assisted Living II	Invoice	1/12/15	345	PO Box 2792 Hayden, ID 83835	Paid	\$	250.00	
	General	Homestead AL at Carriage Cove	Invoice	1/1/15	11209	410 W 1st N Rexburg, ID 83440	Paid	\$	250.00	
	General	Homestead AL Cntr-Rexburg	Invoice	1/1/15	11210	408 West Main St Rexburg, ID 83440	Paid	\$	250.00	
	General	Homestead AL Cntr-St. Anthony	Invoice	1/1/15	11211	360 West 3500 North Rexburg, ID 83440	Paid	\$	250.00	
	General	Ivy Court	Invoice	5/13/15	2354	2200 Ironwood Pl. Coeur D Alene, ID 83814	Paid	\$	250.00	
	General	Karcher Estates SNF	Invoice	2/11/15	1081	1127 Caldwell Blvd Nampa, ID 83651	Paid	\$	250.00	
	General	Kindred Nursing & Rehab- Nampa	Invoice	6/26/15	15019	404 N. Horton St. Nampa, ID 83651	Paid	\$	250.00	
	General	Kindred Nursing & Rehab- Weiser	Invoice	1/22/15	542	331 East Park Street Weiser, ID 83672	Paid	\$	250.00	
	General	Kindred Transitional Care & Rehab-Lew	Invoice	1/23/15	578	3315 8th St. Lewiston, ID 83501	Paid	\$	250.00	
	General	Lakeside Residential Care, INC	Invoice	3/18/15	1630	PO Box 156 Winchester, ID 83555 PO Box 156	Paid	\$	250.00	
-	General	n	Invoice	11/25/15	5488	Winchester, ID 83555	Paid	\$	500.00	
	General	Legends Park Assisted Living Community	Invoice	6/24/15	3223	1820 N. Legends Parkway Coeur D Alene, ID 83815	Paid	\$	200.00	

January through December 2015

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	Drivers		•					1,	
	Primary/ General	Schedule A	Туре	Date	Num	Name Address	Paid		Amount
	General	Madison Carriage Cove	Invoice	4/20/15	2144	410 W 1st N Rexburg, ID 83440	Paid	\$	250.00
	General	Marquis Care at Shaw Mountain	Invoice	5/13/15	2364	909 Reserve St. Boise, ID 83712	Paid	\$	250.00
	General	McCall Rehab & Care Center	Invoice	1/15/15	438	418 Floyde St. McCall, ID 83638 418 Floyde St.	Paid	\$	250.00
	General	<b>"</b>	Invoice	6/15/15	2809	McCall, ID 83638	Paid	\$	250.00
	General	Monte Vista Hills Healthcare Cntr	Credit Merr	3/18/15	11342	1071 Renee Ave. Pocatello, ID 83201	Paid	\$	(250.00)
	General	New Beginnings	Invoice	6/9/15	2622	2105 Avocet Dr. Idaho Falls, ID 83406	Paid	\$	250.00
	General	Payette Center	Invoice	2/20/15	1285	1019 3rd Ave. S Payette, ID 83661	Paid	\$	250.00
	General	Prestige Care & Rehab at the Orchards	Invoice	2/25/15	1394	1014 Burrell Ave. Lewiston, ID 83501	Paid	\$	250.00
	General	Quinn Meadows Rehab & Care Cntr	Invoice	6/15/15	2803	1033 W. Quinn Rd. Pocatello, ID 83202	Paid	\$	250.00
	General	Rexburg Care & Rehab Cntr	Invoice	3/17/15	1573	660 S. 2nd St. W. Rexburg, ID 83440	Paid	\$	250.00
	General	River's Edge Rehab & Living Cntr	Invoice	2/10/15	1020	714 N. Butte Ave. Emmett, ID 83617	Paid	\$	250.00
<b>*</b>	General	Royal Plaza Care Cntr AL	Invoice	4/30/15	15018	2870 Juniper Dr. Lewiston, ID 83501 2870 Juniper Dr.	Paid	\$	50.00
	General	н	Invoice	12/4/15	5520	Lewiston, ID 83501	Paid	\$	250.00
	General	Royal Plaza Health and Rehab SNF	Invoice	12/4/15	5522	2870 Juniper Dr. ewiston, ID 83501	Paid	\$	250.00

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**January through December 2015** 

Primary/ General	Schedule A	Туре	Date	Num	Name Address	Paid	Amount
General	Salubria Cntr	Invoice	6/26/15	3245	355 S. Jennifer St. Cambridge, ID 83610	Paid	\$ 250.00
General	SpringRidge Assisted Living	Invoice	1/12/15	330	2310 Rice Ave. Caldwell, ID 83605	Paid	\$ 150.00
General	St. Luke's Rehab - Elks Sub Acute Rehab	Invoice	3/17/15	1586	Attn: Accts Payable 190 E. Bannock St Boise, ID 83712	Paid	\$ 250.00
General	The Cottages of McCall	Invoice	12/8/15	5562	1079 S. Ancona Ave, Suite 110 Eagle, ID 83706	Paid	\$ 100.00
General	The Cottages of Meridian	Invoice	12/8/15	5564	1079 S. Ancona Ave, Suite 110 Eagle, ID 83706	Paid	\$ 200.00
General	The Cottages of Middleton	Invoice	12/8/15	5566	1079 S. Ancona Ave, Suite 110 Eagle, ID 83706	Paid	\$ 50.00
General	The Cottages of Mountain Home	Invoice	12/8/15	5568	1079 S. Ancona Ave, Suite 110 Eagle, ID 83706	Paid	\$ 100.00
General	The Cottages of Weiser	Invoice	1/8/15	311	1079 S. Ancona Ave, Suite 110 Eagle, ID 83706 1079 S. Ancona Ave, Suite	Paid	\$ 250.00
General	"	Invoice	12/8/15	5574	110 Eagle, ID 83706	Paid	\$ 100.00
General	Twin Falls Center	Invoice	2/20/15	1288	674 Eastland Drive Twin Falls, ID 83301	Paid	\$ 250.00
General	Wellspring Meadows Assisted Living	Invoice	3/24/15	1693	9873 North Buttercup Lane Hayden, ID 83835	Paid Total	\$ 200.00

#### SCHEDULE B ITEMIZED EXPENDITURES

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

Name of Candidate or Committee: Idaho Health Care Association Purpose Codes (Enter up to 3 purpose codes per Expenditure.)

- All Travel Expenses (Airfare, Fuel, Lodging & Mileage)
- Broadcast Advertising (Radio, TV, Internet & Telephone)
- С Contributions to Candidates & PAC's
- D **Donations & Gifts**
- Ε **Event Expenses**
- F Food & Refreshments
- G General Operational Expenses
- Н Independent Expenditures
- L Literature, Brochures, Printing
- Management Services

- Newspaper & Other Periodical Advertising
- 0 Other Advertising (Yard Signs, Buttons, etc.)
- Ρ Postage
- S Surveys & Polls
- Τ Tickets (Events)
- U Utilities
- Wages, Salaries, Benefits & Bonuses
- Υ **Petition Circulators**
- Ζ Preparation & Production of Advertising

Date Spent	Ment Services		
Dute open	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code(s)	Cash or Check
	1. Elect Caroline Nilsson Troy		·
	2794 Highway 95	C	
1,12,15	Chenesee, ID 83832	C	\$ 200.00
	2. Boise Contre-legislative Lunch		
	860 W. Front St.		
3/10/15	Boise, ID 83702	EIF	\$ 5400.00
	3. Eiguren, Fisher, Ellis 1120 W. Daniel Ct		•
	1120 W. Daviel Ct		
3,30,15	Bo154, IN 88713	C	\$ 31.26
	4. Figuren Fisher, Ellis 1120 W. Daniel Ct		
	1120 W. Daniel Ct		
6 23/15	Boise, ID88713	A	\$ 184.8D
	5. Brandon A. Honon for House		
7 5	910 N. Plateau Ave.		
<u>1,B,5</u>	910 N. Plateau Ave. Caldwell, 20 53605	C	\$ 400.0V
	6. Cherie buckner webb for Senate		
/	2304 W. Bella St.		
10,15,15	Buse, 40 83702	C	\$ 250.00
	7. Kelly Arthur Anthon 725 East 200 South		
	725 Past 200 South		
12/10/15	Burley, ID 82318	C	\$ 100.00
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			\$
		Total This Page:	\$ 6566.00

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## Idaho Health Care Association 2015 PAC Donations Paid

9019 F

Primary/ General Schedule F: Pledged in 2015 for 2016 **January through December 2015** 

General	Pledged in 2015 for 2016	Туре	Date	Num	Name Address	Paid	_	Amount
General	Emerson House at River Pointe	Invoice	12/10/15	5589	8250 W. Marigold Street Garden City, ID 83714	Unpaid	\$	250.00
General	Kindred Nursing & Rehab-Aspen Park	Invoice	12/16/15	5750	420 Rowe St. Moscow, ID 83843	Unpaid	\$	250.00
General	Kindred Nursing & Rehab- Caldwell	Invoice	12/16/15	5751	210 Cleveland Blvd. Caldwell, ID 83605	Unpaid	\$	250.00
General	Kindred Nursing & Rehab- Canyon West	Invoice	12/16/15	5752	2814 S. Indiana Ave. Caldwell, ID 8360	Unpaid	\$	250.00
General	Kindred Nursing & Rehab-Mt. Valley	Invoice	12/16/15	5753	601 W. Cameron Ave. Kellogg, ID 83837	Unpaid	\$	250.00
General	Kindred Nursing & Rehab-Nampa	Invoice	11/25/15	5489	404 N. Horton St. Nampa, ID 83651	Unpaid	\$	250.00
General	Kindred Nursing & Rehab-Weiser	Invoice	12/16/15	5754	331 East Park Street Weiser, ID 83672	Unpaid	\$	250.00
General	Kindred Transitional Care & Rehab-Lew	Invoice	12/16/15	5755	3315 8th St. Lewiston, ID 83501	Unpaid Total	\$	250.00 2,000.00