

5994



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

C-2
Rev. 12/14

16 OCT 26 PM 4:34

SECRETARY OF STATE

Section I

Name of Candidate or Political Committee and Chairperson Idaho Dental Political Action Committee		Office Sought (If candidate) STATE OF IDAHO	
Mailing Address 1220 W Hays Street		City and Zip Boise 83702	Work Phone (208) 343-7543
Name of Political Treasurer Linda Swanstrom			
Mailing Address 1220 W Hays Street		City and Zip Boise 83702	Work Phone (208) 343-7543

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 _____ through _____

- 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	\$ 51,445.92
Line 2: Enter Beginning Cash Balance**	\$ 60,068.82	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ 546.84	\$ 50,804.74
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 60,615.66	\$ 102,250.66
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ 0.00	\$ 41,635.00
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ 60,615.66	\$ 60,615.66
Line 7: Outstanding Debt to Date (Enter amount from line 18, 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 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:
Lawrence Denney
Secretary of State
PO Box 83720
Boise ID 83720-0080
Phone: (208) 334-2852
Fax: (208) 334-2282

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

Linda Swanstrom
Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Idaho Dental Political Action Committee

	Total This Period
Contributions	
① Unitemized Contributions (\$50 and less) # of Contributors _____	+ \$
② Itemized Contributions (Total of all Schedule A sheets)	+ \$ 546.84
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)	= \$ 546.84

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

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	= \$
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)	= \$

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	= \$

Schedule A
Itemized Contributions
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee: IDAHO DENTAL POLITICAL ACTION COMMITTEE								
Date	First Name	Last Name	Amount Paid	YTD Paid	Address	City	State	Zip Code
10/17/16	Scott	Alexander	\$25.00	\$290.00	3167 S Bown Way	Boise	ID	83706-5400
10/17/16	John	Blaisdell	\$84.00	\$860.12	1916 Ellis Ave	Caldwell	ID	83605-4811
10/17/16	Zachary	Brumbach	\$17.00	\$320.04	609 N Calgary Ct Ste 104	Post Falls	ID	83854-4906
10/17/16	Duston	Connaughton	\$45.84	\$608.40	7301 W Emerald St Ste 102	Boise	ID	83704-8689
10/17/16	Hilary	Dunstan	\$50.00	\$660.08	1070 N Curtis Rd Ste 240	Boise	ID	83706-1258
10/17/16	Dennis	Hatch	\$71.00	\$710.12	129 W 210 N	Blackfoot	ID	83221-5882
10/17/16	Spencer	Lloyd	\$84.00	\$890.12	4012 Brian Ave.	Caldwell	ID	83605-6305
10/17/16	Kent	McVey	\$42.00	\$620.00	1322 W Kathleen Ave Ste 1	Coeur D Alene	ID	83815-7365
10/17/16	Joel	Newton	\$20.00	\$200.04	2014 Mountain View Cir	Twin Falls	ID	83301-4316
10/17/16	Christopher	Poulsen	\$16.00	\$112.00	602 N Calgary Ct Ste 102	Post Falls	ID	83854-4000
10/17/16	Thomas	Smart	\$42.00	\$420.08	1717 Lincoln Way Ste 204	Coeur D Alene	ID	83814-2556
10/17/16	Timothy	Thompson	\$50.00	\$670.08	241 4th Ave N	Twin Falls	ID	83301-6139
		Total	\$546.84					

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

Name of Candidate or Committee: **Idaho Dental Political Action Committee**

Purpose Codes (Enter up to 3 purpose codes per Expenditure.)

- | | |
|---|---|
| A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) | N Newspaper & Other Periodical Advertising |
| B Broadcast Advertising (Radio, TV, Internet & Telephone) | 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 |
| H Independent Expenditures | Y Petition Circulators |
| L Literature, Brochures, Printing | Z Preparation & Production of Advertising |
| M Management Services | |

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code(s)	Cash or Check
____/____/____	1.		\$ _____
____/____/____	2.		\$ _____
____/____/____	3.		\$ _____
____/____/____	4.		\$ _____
____/____/____	5.		\$ _____
____/____/____	6.		\$ _____
____/____/____	7.		\$ _____
____/____/____	8.		\$ _____
____/____/____	9.		\$ _____
____/____/____	10.		\$ _____
Total This Page:			\$ 0.00

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