

6005



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

POSTED
2/4/17 ca

C-2
Rev. 12/14

17 JAN 31 PM 12:38

Section I

Name of Candidate or Political Committee and Chairperson Idaho Medical PAC		Office Sought (if candidate) STATE OF IDAHO District (if any) STATE OF IDAHO	
Mailing Address PO Box 2668	City and Zip Boise 83701	Home Phone	Work Phone (208) 344-7888
Name of Political Treasurer Susie Pouliot			
Mailing Address PO Box 2668	City and Zip Boise 83701	Home Phone	Work Phone (208) 344-7888

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	\$ 34,021.10
Line 2: Enter Beginning Cash Balance**	\$ 3,734.83	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ 7,418.52	\$ 19,776.99
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 11,153.35	\$ 53,798.09
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ 40.02	\$ 42,684.76
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ 11,113.33	\$ 11,113.33
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, Susie Pouliot, 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.

Susie Pouliot

Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Idaho Medical PAC

			Total This Period
Contributions			
①	Unitemized Contributions (\$50 and less) # of Contributors <u>42</u>	+	\$ 1.52
②	Itemized Contributions (Total of all Schedule A sheets)	+	\$ 7,417.00
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)	=	\$ 7,418.52
Expenditures			
⑥	Unitemized Expenditures (Less than \$25) # of Expenditures <u>4</u>	+	\$ 40.02
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)	=	\$ 40.02
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 Medical PAC

Date Received	Full Name, Mailing Address and Zip Code of Contributor	Cash or Check
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	1. See attached list.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	2.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	3.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	4.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	5.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	6.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	7.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	8.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	9.	\$ _____ \$ _____ Calendar Year-To-Date
/ / <input type="checkbox"/> Primary <input type="checkbox"/> General	10.	\$ _____ \$ _____ Calendar Year-To-Date
Total This Page:		\$ 0.00

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

ITEMIZED CONTRIBUTIONS
of more than Fifty Dollars (\$50.00) this period
IDAHO MEDICAL POLITICAL ACTION COMMITTEE (IMPAC)

Date	Name	ADDRESS 1	City	ST	ZIP	Amount
12/12/2016	Suzanne M. Allen, MD	322 E Front St #590	Boise	ID	83702-7377	\$500.00
11/28/2016	Anthony V. Anderson, MD	PO Box 1096	Caldwell	ID	83606	\$150.00
10/24/2016	Lawrence D. Anderson, MD	8955 W Hackamore Dr	Boise	ID	83709-1673	\$150.00
10/19/2016	Tim A. Ashaye, MD	2365 E Gala St #2	Meridian	ID	83642-4881	\$150.00
11/28/2016	Wallace C. Baker, MD	1880 John Adams Pkwy	Idaho Falls	ID	83401-4315	\$150.00
10/17/2016	Barry F. Bennett, MD	2775 Channing Way	Idaho Falls	ID	83404-7510	\$150.00
10/24/2016	Kay Bishop, MD	703 Rigby Lake Dr	Rigby	ID	83442-5192	\$150.00
11/21/2016	Edmund C. Boese, MD	742 E State St # 150	Eagle	ID	83616-5941	\$150.00
10/20/2016	C. Paul Brooke, MD	2001 S Woodruff Ave #12A	Idaho Falls	ID	83404-6372	\$150.00
10/25/2016	Mark L. Capener, MD	2065 E 17th St #B	Idaho Falls	ID	83404-8042	\$150.00
10/19/2016	David M. Christensen, MD	1411 Falls Ave E #1301	Twin Falls	ID	83301-3467	\$150.00
11/28/2016	Wade K. Christensen, PA-C	1880 John Adams Pkwy	Idaho Falls	ID	83401-4315	\$150.00
10/29/2016	William A. Cone, MD	875 Perimeter Dr MS4201	Moscow	ID	83844-4201	\$150.00
11/16/2016	Thomas F. Crais, MD	315 S River St	Hailey	ID	83333-8426	\$150.00
11/1/2016	Jeffrey C. Dabell, MD	177 Vista Dr	Pocatello	ID	83201-5824	\$150.00
11/7/2016	David R. Donaldson, MD	333 N 18th Ave #B3	Pocatello	ID	83201-3358	\$150.00
10/14/2016	Ronald V. Dorn, MD	916 W Braemere Rd	Boise	ID	83702-1313	\$150.00
10/31/2016	Taya D. Gill, PA-C	4183 N McKinley Park Ave	Meridian	ID	83646-2646	\$150.00
11/28/2016	G. Joana Gonzales, PA-C	2273 E Gala St #100	Meridian	ID	83642-7289	\$150.00
10/31/2016	Timothy P. Hodges, DO	1648 NW 1st St	Meridian	ID	83642	\$150.00
11/14/2016	Mark E. Hollingshead, MD	360 E Mallard Dr #110	Boise	ID	83706-3945	\$150.00
11/28/2016	Scott P. Hoopes, MD	2273 E Gala St #100	Meridian	ID	83642-7289	\$150.00
10/19/2016	Travis "TJ" Kemp, MD	3015 E Magic View Dr	Meridian	ID	83642-3757	\$1,000.00
11/9/2016	Kenneth G. Khatain, MD	500 W Fort St	Boise	ID	83702-4501	\$150.00
10/3/2016	Kate Kuhlman-Wood	1875 N Lakewood Dr #200	Coeur D Alene	ID	83814-4928	\$77.00
10/3/2016	Jeffrey R. Lyman, MD	1875 N Lakewood Dr #200	Coeur D Alene	ID	83814-4928	\$150.00
11/9/2016	Kevin H. Maas, MD	111 W Main St #100	Boise	ID	83702-7307	\$150.00
12/12/2016	Scott K. Magnuson, MD	1686 W Riverstone Dr #1	Coeur D Alene	ID	83814-5779	\$500.00
11/30/2016	Dinu G. Mistry, MD	341 E Bannock St	Boise	ID	83712-6208	\$150.00
11/27/2016	Torrey S. Nash, MD	645 E 5th St	Weiser	ID	83672-2202	\$150.00
11/30/2016	Michael L. Oglesbay, DO	1110 E Polston Ave #1	Post Falls	ID	83854-6139	\$150.00
10/22/2016	Joseph N. Ragan, MD	1000 N 8th Ave	Pocatello	ID	83201-5757	\$150.00
10/24/2016	Deric V. Ravsten, DO	1777 E Clark St #210	Pocatello	ID	83201-3357	\$150.00
10/28/2016	Steven E. Roser, MD	600 N Robbins Rd #100	Boise	ID	83702-4564	\$100.00
10/17/2016	Dan J. Schmidt, MD	267 Circle Dr	Moscow	ID	83843-2136	\$90.00
11/1/2016	Kevin G. Shea, MD	600 N Robbins Rd #100	Boise	ID	83702-4564	\$150.00
11/28/2016	Jody Stark, NP	PO Box J	Ontario	OR	97914-0020	\$150.00
11/28/2016	Laura A. Tabor, PA-C	1880 John Adams Pkwy	Idaho Falls	ID	83401-4315	\$150.00
10/21/2016	Julio C. Vasquez, MD	777 Hospital Way # 215	Pocatello	ID	83201-5175	\$50.00
11/9/2016	Darin L. Weyhrich, MD	222 N 2nd St #206	Boise	ID	83702-6130	\$150.00
10/27/2016	David W. Wood, MD	425 W Bannock St	Boise	ID	83702-6035	\$150.00

*Personal DS PT
letter 7/22*

\$7,417.00