



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE
(Please Print or Type)

18 DEC 06 PM 12:00

SECRETARY OF STATE
STATE OF IDAHO

Section I

Name of Candidate or Political Committee and Chairperson Idaho Health Care Association Political Action Committee		Office Sought (if candidate)		District (if any)	
Mailing Address 1524 W Cayuse Creek Dr		City and Zip Meridian 83646-4795		Home Phone 2087942985	
				Work Phone 2083439735	
Name of Political Treasurer Robert Vande Merwe					
Mailing Address 1524 W Cayuse Creek Dr		City and Zip Meridian 83646-4795		Home Phone 2087942985	
				Work Phone 2083439735	

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 / 22 / 2018 through 11 / 16 / 2018

- 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	\$ 23,202.58
Line 2: Enter Beginning Cash Balance**	\$ 7,106.36	\$ XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)	\$ 3,000.00	\$ 14,886.00
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ 10,106.36	\$ 38,088.58
Line 5: Total Expenditures (Enter amount from line 11, page 2)	\$ 0.00	\$ 27,982.22
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)	\$ 10,106.36	\$ 10,106.36
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)	\$ 0.00	

*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, Robert 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.

Digital Signature

Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Idaho Health Care Association Political Action Committee
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			Total This Period
	Contributions		
①	Unitemized Contributions (\$50 and less) # of Contributors <u>0</u>	+	\$ 0.00
②	Itemized Contributions (Total of all Schedule A sheets)	+	\$ 3,000.00
③	In-Kind Contributions (Total of all Contribution amounts from Schedule C sheets)	+	\$ 0.00
④	Loans (Total of all New Loan amounts from Schedule D sheets)	+	\$ 0.00
⑤	Total Contributions (Transfer this figure to page 1, Section IV, Line 3)	=	\$ 3,000.00

	Expenditures		
⑥	Unitemized Expenditures (Less than \$25) # of Expenditures <u>0</u>	+	\$ 0.00
⑦	Itemized Expenditures (Total of all Schedule B sheets)	+	\$ 0.00
⑧	In-Kind Expenditures (Total of all Expenditure amounts from Schedule C sheets)	+	\$ 0.00
⑨	Loan Repayments (Total of all Loan Repayment amounts from Schedule D sheets)	+	\$ 0.00
⑩	Credit Card and Debt Repayments (Total of all Repayment amounts from Schedule E sheets)	+	\$ 0.00
⑪	Total Expenditures (Transfer this figure to page 1, Section IV, Line 5)	=	\$ 0.00

	Loans, Credit Cards and Debt		
⑫	Outstanding Balance from previous reporting period	+	\$ 0.00
⑬	New Loans received during this reporting period (Total of all New Loan amounts plus Accrued Interest from Schedule D sheets)	+	\$ 0.00
⑭	New Credit Card and Debt incurred this reporting period (Total of all New Incurred Debt amounts from Schedule E sheets)	+	\$ 0.00
⑮	Subtotal	=	\$ 0.00
⑯	Repayments of Loans made during this reporting period (Total of all Loan Repayment amounts from Schedule D sheets)	-	\$ 0.00
⑰	Repayments of Credit Card and Debt this reporting period (Total of all Debt Repayment amounts from Schedule E sheets)	-	\$ 0.00
⑱	Total Outstanding Balance at close of this period (Transfer this figure to page 1, Section IV, Line 7)	=	\$ 0.00

	Pledged Contributions		
⑲	Unitemized Pledged Contributions (\$50 and less) # of Pledges <u>0</u>	+	\$ 0.00
⑳	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+	\$ 0.00
㉑	Total Pledged Contributions this period	=	\$ 0.00



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

Name of Candidate or Committee:	Idaho Health Care Association Political Action Committee
Reporting Period:	30 Day Post-General

Date	ElectionType	Contributor	Amount	YTDAmount
11/16/2018		Harmony House Assisted Living II PO Box 2792 Hayden, ID 83835	\$250.00	
11/16/2018		Harmony House Assisted Living I PO Box 2792 Hayden, ID 83835	\$250.00	
11/15/2018		Indianhead Estates 590 W Indianhead Road Weiser, ID 83672	\$250.00	
11/15/2018		Caribou Memorial Living Center 300 South 3rd West Soda Springs, ID 83276	\$250.00	
11/15/2018		Guardian Angel Homes-PF 1050 E Mullan Ave Post Falls, ID 83854	\$250.00	
11/12/2018		Palouse Hills Assisted Living 1401 N Polk Street Moscow, ID 83843	\$250.00	
11/12/2018		Lakeside - East 605 Nez Perce Avenue Winchester, ID 83555	\$250.00	
11/12/2018		Lakeside PO Box 156 Winchester, ID 83555	\$250.00	
11/09/2018		Developmental Options 415 S Arthur Pocatello, ID 83204	\$250.00	
11/08/2018		Independent Living Services PO Box 6395 Boise, ID 83707	\$250.00	
11/08/2018		Evergreen Place Assisted Living 1043 Burley Avenue Buhl, ID 83316	\$250.00	
11/08/2018		River Rock Assisted Living 1053 Burley Ave Buhl, ID 83316	\$250.00	
Grand Total:			\$3,000.00	