



CAMPAIGN FINANCIAL DISCLOSURE REPORT

SUMMARY PAGE

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(Please Print or Type)

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: [x] Original [] Amendment

This report is for the period from 11 / 17 / 2018 through 12 / 31 / 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 [x] Annual Report [] Semi-Annual Report (Statewide Candidates Only)

Is this a Termination Report: [] Yes [x] 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 to Date.

*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 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)	+ \$ 4,850.00
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)	= \$ 4,850.00

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:	Second Annual

Date	ElectionType	Contributor	Amount	YTDAmount
12/28/2018		St. Luke's Rehabilitation - Elks Sub Acute Rehab 600 N Robbins Roa Boise, ID 83702	\$250.00	
12/28/2018		Grangeville Health & Rehabilitation 410 E N 2nd St Grangeville, ID 83530	\$250.00	
12/28/2018		Grace Assisted Living Nampa 1610 Sunny Ridge Road Nampa, ID 83686	\$250.00	
12/28/2018		Good Samaritan Society - Idaho Falls Village 840 E Elva Street Idaho Falls, ID 83401	\$250.00	
12/28/2018		Gateway Transitional Care Center 527 Marigold Dr Pocatello, ID 83201	\$250.00	
12/28/2018		Cascadia of Nampa 900 N Happy Valley Rd Nampa, ID 83687	\$250.00	
12/28/2018		Clearwater of Cascadia 1204 Shriver Rd Orofino, ID 83544	\$250.00	
12/28/2018		Canyon West of Cascadia 2814 S. Indiana Ave. Caldwell, ID 83605	\$250.00	
12/18/2018		Desano Place Facilities 50 W 620 N Shoshone, ID 83352	\$250.00	
12/04/2018		Weiser Care of Cascadia 331 East Park Street Weiser, ID 83672	\$250.00	
12/04/2018		Caldwell of Cascadia 210 Cleveland Blvd Caldwell, ID 83605	\$250.00	
12/04/2018		The Orchards of Cascadia 404 N Horton Street Nampa, ID 83651	\$250.00	
12/04/2018		Countryside Care & Rehabilitation Minidoka Memorial Hospital 1224 8th Street Rupert, ID 83350	\$250.00	
11/27/2018		Aspen Transitional Rehabilitation 2867 E Copper Point Drive Meridian, ID 83642	\$250.00	

11/27/2018		Emerson House at River Pointe 8250 W Marigold Street Garden City, ID 83714	\$250.00	
12/27/2018		Milestone Decisions, Inc. 611 S Main Moscow, ID 83843	\$250.00	
11/27/2018		SpringRidge Assisted Living 2310 Rice Ave Caldwell, ID 83605	\$250.00	
11/27/2018		Franklin County Transitional Care 44 N 1st Street Preston, ID 83263	\$100.00	
11/27/2018		Ashton Memorial Living Center PO Box 838 Ashton, ID 83420	\$250.00	
11/19/2018		CommuniCare, Inc 40 W Franklin Rd, Ste F Meridian, ID 83642	\$250.00	
		Grand Total:	\$4,850.00	