

8716

12-31-18 2018

Reg Paul Ady
Exec Paul Ady



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

C-2
Rev. 12/14

JAN 16 '20 AM 11:39
IDAHO SECRETARY OF STATE

Section I

| | | | | | |
|--|--|---------------------------------------|--|---------------------------------|--|
| Name of Candidate or Political Committee and Chairperson <u>Idaho Health Care Association Committee</u> | | Office Sought (If candidate) | | District (if any) | |
| Mailing Address <u>1524 W. Cayuse Creek Drive</u> | | City and Zip <u>Meridian 83646</u> | | Home Phone <u>2087942985</u> | |
| Name of Political Treasurer <u>Robert Vandemerwe</u> | | | | Work Phone <u>2083439735</u> | |
| Mailing Address <u>1524 W Cayuse Creek Drive</u> | | City and Zip <u>Meridian 83646</u> | | Home Phone <u>2087942985</u> | |
| | | | | Work Phone <u>2083439735</u> | |

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 11/17/18 through 12/31/18

- 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* | \$ <u>XXXXXX</u> | \$ <u>23,452.58</u> |
| Line 2: Enter Beginning Cash Balance** | \$ <u>11,606.36</u> | \$ <u>XXXXXX</u> |
| Line 3: Total Contributions (Enter amount from line 5, page 2) | \$ <u>4850.00</u> | \$ <u>19,736.00</u> |
| Line 4: Subtotal (Add lines 1, 2 and 3) | \$ <u>16,456.36</u> | \$ <u>43,188.58</u> |
| Line 5: Total Expenditures (Enter amount from line 11, page 2) | \$ <u>0</u> | \$ <u>26,732.22</u> |
| Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4) | \$ <u>16,456.36</u> | \$ <u>16,456.36</u> |
| Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2) | \$ <u>0</u> | |

*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:
Secretary of State
PO Box 83720
Boise ID 83720-0080
Phone: (208) 334-2862
Fax: (208) 334-2282

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

[Signature]
Signature of Political Treasurer