CAMPAIGN FINANCIAL DISCLOSURE REPORT SI IMMARY PAGE 05 NOV 20 AM 8: 45

C-2 Rev. 10/07

(Please Print or Type)

SECRETARY OF STATE

Section I			STATE OF IDA	Hn''
Name of Candidate or Political Committee and		1	Office Sought (if candidate)	District (if any)
Mailing Address	NARY MEdica	L ASSN	Home Phone	Work Phone
1841 W. SECLED	ed Court	—·F		208-922-9431
Name of Political Treasurer				124 113
DAUID G€ Mailing Address	RDER DUM City and	1 Zip	Home Phone	Work Phone
1040 W, 23 rd	$\subset p_{\ell}$		208-664-3100	SAME
	e or Political Committee	Political Treasurer		
Section II	TYF	E OF REPORT		
This filing is an:	☐ Amendment			
This report is for the period from	// through			
☐ 7 Day Pre-Primary Report	☐ 30 Day Po	st-Primary Report	October 10	Pre-General Report
☐ 7 Day Pre-General Report	⊠ 30 Day Po	st-General Report	☐ Annual Repo	ort
☐ Semi-Annual Report (Statewi	de Candidates Only)			
Is this a Termination Report:	es 🗵 No			
Section III	STATEMENT OF NO CO	NTRIBUTIONS OR EXPE	NDITURES	
Directions: If you had no contributions	or expenditures during this r	eporting period, check the	box next to the statemen	
Be sure to ca	ry forward the appropriate "C	Calendar Year to Date" fig	ures in Column II, Section	n IV.
I hereby certify that I	ave received no contribution	s and have made no exp	enditures during this repo	rting period.
Section IV		SUMMARY		
To reach your Calendar Year to Date fig figures to the Column II figures of your			COLUMN I his Period	COLUMN II Calendar Year to Date
Line 1: Cash on Hand January 1, This (Calendar Year*	\$>	XXXXX \$	5159.16
Line 2: Enter Beginning Cash Balance*		\$_ <u>5</u>	159,16 \$	XXXXXX
Line 3: Total Contributions (Enter amou	from line 5, page 2)	\$		0
Line 4: Subtotal (Add lines 1, 2 and 3)		\$ <u>.5</u>	159.16 \$	5159.16
Line 5: Total Expenditures (Enter amou	from line 11, page 2)	\$_2	<u>200.00</u> \$	2200.00
Line 6: Enter Ending Cash Balance (Su	btract line 5 from line 4)	\$2	959.16 \$	2959 16
Line 7: Outstanding Debt to Date (Enter	amount from line 18, page 2	\$	<u> </u>	
*This same figure should be entered on **This is the figure on line 6 of the last 0 Note: The closing cash balance for the	Campaign Financial Disclosur	e Report filed. If this is yo		
Section	V			11-18-0
Return This Report To: Ben Ysursa Secretary of State PO Box 83720 Boise ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	I, David G Name of Po report is a true, complete	and Re	, hereby certify that the ancial Disclosure Report	as required by law.

DETAILED SUMMARY

Name of Candidate or Committee: IDAho VETERINARY MEdiCAL ASSN

				Total This Period
	Contributions		Taget and the second	
1	Unitemized Contributions (\$50 and less)	# of Contributors	+	\$
2	Itemized Contributions (Total of all Schedule As	heets)	+	\$
3	In-Kind Contributions (Total of all Contribution a	mounts from Schedule C sheets)	+	\$
4	Loans (Total of all New Loan amounts from Sch	edule D sheets)	+	\$
(5)	Total Contributions (Transfer this figure to page 1, Sect	ion IV, Line 3)	=	\$ -c-

	Expenditures		
6	Unitemized Expenditures (\$25 and less) # of Expenditures	+	\$
7	Itemized Expenditures (Total of all Schedule B sheets)	+	\$ 2200,00
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)	=	\$ 2200.00

	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)	=	\$ -0-

	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	=	\$	-0	

SCHEDULE B ITEMIZED EXPENDITURES

Page of 2

Twenty-Five Dollars (\$25.00) or more this period

Name o	of Candidate or Committee: /DA-ho UE To	RIA	ARY	MEDICAL	ASSN	
Purpos	se Codes		,			
Α	All Travel Expenses (Airfare, Fuel, Lodging & Mileage)	N	Newspaper	& Other Periodical Adver	tising	
В	Broadcast Advertising (Radio, TV & Internet)	0	Other Adver	rtising (Yard Signs, Buttor	is, etc.)	
С	Contributions to Candidates & PAC's	Р	Postage	-, -	•	
D	Donations & Gifts	S	Surveys & F	Polls		
E	Event Expenses	Т	Tickets (Eve	ents)		
F	Food & Refreshments	U	Utilities			
G	General Operational Expenses	W	Wages, Sala	aries, Benefits & Bonuses	}	
L	Literature, Brochures, Printing	Υ	Petition Circ	culators		
М	Management Services	Z	Preparation	& Production of Advertisi	ng	
M		ż			ng	

Date Spent	Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
	1. MARK SNODGRASS		
	1406 N. LESTIE WAY		
10/21/08	MFRIdIAN 10 83646 2. TEEF FAULKNER	۵	\$ 100.00
	2. JEEF FAULKNER		
4	1245 S. 2500 E		100 00
10/21/08	GOOD.Ng 10 83320	D	\$ 100,00
	Gooding 10 83320 3. LEE HEINVICH fo Box 1092		
10.01	CASCARC 10 824 H	_	
10/21/08	4. JOAN CLOONAN	D	\$ 100.00
	4. JOAN CLOONAN		
10.91.08	9038 W. BRACKSIDE LANG	D	
10 12: 10:3	BC ID 83714 5. CARLOS BILBAC	 1	\$ 100.00
	5. CARLOS BILBAC ZOEZ CERRAL RÔ		
10/21/08	SOUR CERRAL EN	D	100 00
10 / 11 / 0 3	6. RANDY DOMAN 734 WN 2nd ST	<u> </u>	\$ 100.00
	O. RANDY UCMAN		
10 121 108	GRANG CULLS 1D 83530	D	\$ 100.00
70 / 30 / 0 8	GRANGEVILLE 1D 83530 7. JOHN VANDER WOUDE		\$_700.00
	5311 Ridgewood Rd		
10121108	NAMPA 1D 83687	D	\$ 100,00
	8. Russ Fulcher		
	PC BCX 1166	_	
10/21/08	PO BOX 1166 MERECIAN ID 83680 9. JOHN ANDREASON	\mathcal{D}	\$ 100.00
	9. JOHN ANDREASON		
	5120 N. MT. VIEW DR		
10121108	BO ID 83704	\Box	\$ 100.00
	10. TOM LOERTCHER		
1	1357 BONE Rd	\Box	1000 4 5
10/21/08	10NA 10 83427	<u> </u>	\$ 1000,00
		l This Page:	\$ 0.00 1900.00

SCHEDULE B ITEMIZED EXPENDITURES

Page of 2

\$ 0.00

Twenty-Five Dollars (\$25.00) or more this period

Name o	of Candida	ate or Committee	: IDAho VETERINARY MEDICAL	ASSN	
A B C D E F G L M	Purpose Codes A All Travel Expenses (Airfare, Fuel, Lodging & Mileage) B Broadcast Advertising (Radio, TV & Internet) C Contributions to Candidates & PAC's D Donations & Gifts E Event Expenses F Food & Refreshments G General Operational Expenses L Literature, Brochures, Printing N Newspaper & Other Periodical Advertising O Other Advertising (Yard Signs, Buttons, etc.) P Postage S Surveys & Polls T Tickets (Events) U Utilities W Wages, Salaries, Benefits & Bonuses Y Petition Circulators				
Date	Spent		Full Name, Mailing Address and Zip Code of Recipient	Purpose Code	Cash or Check
1012	1108	1405 8	RUSCHE 1774 AUE ON 10 83501	D	\$ 100.00
10 12	1108	2. MACK 443 REXBI	Shirley Shirley N-Maran VIEW ARG ID 83440 Neilson	9	\$_/00.00
	n 108	4303	Neilson S.W. Easy ST Jome 10 83647	A	\$ <u>/00.00</u>
		4.			\$
		5.			\$
		6.			\$
		7.			\$
,	1	8.			\$
 '=		9.			<u> </u>

10.

Total This Page: