Section I	CAMPAIGN FINANCIAL DISCL SUMMARY PA (Please Print or Ty	GE 20 FEB 04 (pe) SECRETA	4 PM 12:16 ARY OF STATE OF IDAHO	Rev.
Name of Candidate or Political Committee and Chairp Idaho Optometric Physicians		Office Sought (if c	andidate)	District (if any)
Mailing Address 3313 W Cherry Ln #433	City and Zip Meridian 83642	Home Phone	Work Phone 208890	
Name of Political Treasurer Lisa White Mailing Address 3313 W Cherry Ln #433	City and Zip Meridian 83642	Home Phone	Work Phone 2088903	
Change of address for: Candidate or I Section II This filing is an: ✓ Original This report is for the period from <u>01</u> / <u>0</u> ☐ 7 Day Pre-Primary Report	TYPE OF REPO	<u>2019</u>	tober 10 Pre-General	Report
7 Day Pre-General Report	30 Day Post-General R		nual Report	
Semi-Annual Report (Statewide C Is this a Termination Report: Yes	No No			
Section III Directions: If you had no contributions or e Be sure to carry for	No TATEMENT OF NO CONTRIBUTION	od, check the box next to the r to Date" figures in Column	II, Section IV.	sign this rep
Section III Directions: If you had no contributions or e Be sure to carry for	No TATEMENT OF NO CONTRIBUTION expenditures during this reporting perior privard the appropriate "Calendar Yea	od, check the box next to the r to Date" figures in Column	II, Section IV.	sign this rep
Semi-Annual Report (Statewide C Is this a Termination Report: Yes Section III Directions: If you had no contributions or e Be sure to carry for I hereby certify that I have	No TATEMENT OF NO CONTRIBUTION expenditures during this reporting perior provard the appropriate "Calendar Yea received no contributions and have n SUMMARY Add this report's Column I	od, check the box next to the r to Date" figures in Column	II, Section IV.	N II Year
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	Section V
Return This Report To: Lawerence Denney	
Secretary of State PO Box 83720	I, <u>Lisa White</u> , hereby certify that the information in this Name of Political Treasurer
Boise ID 83720-0080 Phone: (208) 334-2852	report is a true, complete and correct Campaign Financial Disclosure Report as required by law.
Fax: (208) 334-2282	Digital Signature

10679

Digital Signature Signature of Political Treasurer

DETAILED SUMMARY

Name of Candidate or Committee: Idaho Optometric Physicians PAC

		Total This Period
	Contributions	
1	Unitemized Contributions (\$50 and less) # of Contributors 0	+ \$0.00
2	Itemized Contributions (Total of all Schedule A sheets)	+ \$9,185.00
3	In-Kind Contributions (Total of all Contribution amounts from Schedule C she	ets) + \$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)	= \$9,185.00

	Expenditures		
6	Unitemized Expenditures (Less than \$25) # of Expenditures 0	+	\$0.00
$\overline{7}$	Itemized Expenditures (Total of all Schedule B sheets)	+	\$2,000.00
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)	=	\$2,000.00

	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 _0	+ \$0.00
20	Itemized Pledged Contributions this Period (Total of all Schedule F sheets)	+ \$0.00
21)	Total Pledged Contributions this period	= \$0.00



Name of Candidate or Committee:	Idaho Optometric Physicians PAC
Reporting Period:	First Annual

Date	ElectionType	Contributor	Amount	YTDAmount
12/20/2019		Greene, Raymond 850 Ironwood Dr #104 Coeur d'Alene, ID 83814	\$500.00	\$500.00
12/05/2019		Pierce, Eric 1970 Overland Ave Burley, ID 83318	\$500.00	\$500.00
12/05/2019		Oman, Delbert 1970 Overland Ave Burley, ID 83318	\$500.00	\$500.00
12/10/2019		Lewis, Scott 1565 E Leighfield Dr #100 Meridian, ID 83646	\$500.00	\$500.00
12/19/2019		Ellenbecker, Wayne 2140 W Riverstone Dr Coeur d'Alene, ID 83814	\$200.00	\$200.00
12/19/2019		Ellenbecker, Cindy 2140 Riverstone Dr Ste 101 Coeur d'Alene, ID 83814	\$200.00	\$200.00
12/15/2019		Walker, Jared 1067 Eastland Dr Twin Falls, ID 83301	\$500.00	\$500.00
12/15/2019		Walker, Gary 1602 Eastland Dr Twin Falls, ID 83301	\$500.00	\$500.00
12/15/2019		Hatch, Rustin 1425 Evergreen Drive Twin Falls, ID 83301	\$500.00	\$500.00
11/15/2019		Davis, James 201 S Lincoln Jerome, ID 83338	\$500.00	\$500.00
11/15/2019		Grill, Robert 844 Shoshone St E Twin Falls, ID 83301	\$500.00	\$500.00
11/15/2019		Snapp, Steve 110 N 1st Ave Hailey, ID 83333	\$500.00	\$500.00
11/01/2019		Cleverly, Chad 3293 N Milwaukee Boise, ID 83704	\$500.00	\$500.00
09/15/2019		Bewley, James 420 E. Elm St. Caldwell, ID 83605	\$365.00	\$365.00
11/05/2019		Birch, Jared 1689 Pancheri Drive Idaho Falls, ID 83402	\$550.00	\$550.00
10/03/2019		Lee, Randy 8620 W Atwater Dr Garden City, ID 83714	\$500.00	\$500.00
10/15/2019		Gleason, Katherine 2500 W A St, Ste 202 Moscow, ID 83843	\$500.00	\$500.00

10/15/2019	Huber, Lauren 1926 W. State Street Boise, ID 83702	\$500.00	\$500.00
10/03/2019	Pabalis, Gary 11972 W. Gamekeeper Dr. KUNA, ID 83634	\$600.00	\$600.00
12/15/2019	Slusser, Todd 714 G St Rupert, ID 83350	\$270.00	\$270.00
	Grand Total:	\$9,185.00	



Name of Candidate or Committee:	Idaho Optometric Physicians PAC
Reporting Period:	First Annual

Date	Recipient	Amount	Code	Optional
12/01/2019	Bayer, Clifford	\$500.00	с	Explanation:
	592 E. St. Kitts Dr.			Support:
	Meridian, ID 83642			Oppose:
12/01/2019	Bedke, Scott	\$500.00	с	Explanation:
	439 E Shore Dr Ste 100			Support:
	Eagle, ID 83616			Oppose:
11/15/2019	Anthon, Kelly	\$1,000.00	с	Explanation:
	725 E 300 S. Burley			Support:
	Burley, ID 83318			Oppose:
	Grand Total:	\$2,000.00		