



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

**Section I**

Name of Candidate or Political Committee and Chairperson <b>Tom Loertscher</b>		Office Sought (if candidate) <b>Representative</b>	District (if any) <b>31-B</b>
Mailing Address <input type="checkbox"/> Check if address change. <b>1357 Bone Rd</b>	City and Zip <b>Iona, ID 83427</b>	Home Phone <b>208-522-3072</b>	Work Phone <b>208-522-3072</b>
Name of Political Treasurer <b>Thomas F. Loertscher</b>			
Mailing Address <input type="checkbox"/> Check if address change. <b>1357 Bone Rd</b>	City and Zip <b>Iona, ID 83427</b>	Home Phone <b>208-522-3072</b>	Work Phone <b>208-522-3072</b>

**Section II**

**TYPE OF REPORT**

Directions: To indicate the type of report being filed, fill in the appropriate dates and check the appropriate box(es). See the instructional manual for reporting periods and due dates.

This report is for the period from 10 / 18 / 04 through 11 / 12 / 04

- 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 Report an amendment?  Yes  No      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, fill in the appropriate dates 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 from \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ through \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_.

**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).

	<b>COLUMN I This Period</b>	<b>COLUMN II Calendar Year to Date</b>
Line 1: Cash on Hand January 1, This Year*	\$ <u>XXXXXX</u>	\$ _____
Line 2: Enter Cash Balance at Close of Last Reporting Period**	\$ <u>2,253.11</u>	\$ <u>XXXXXX</u>
Line 3: Total Contributions (Enter amount from page 2)	\$ <u>1,200.00</u>	\$ <u>20,275.00</u>
Line 4: Subtotal (Add lines 1, 2 and 3)	\$ <u>3,453.11</u>	\$ <u>20,275.00</u>
Line 5: Total Expenditures (Enter amount from page 2)	\$ <u>3,232.35</u>	\$ <u>20,054.24</u>
Line 6: Cash Balance at Close of Period (Subtract line 5 from line 4)**	\$ <u>220.76</u>	\$ <u>220.76</u>
Line 7: Outstanding Debt to Date	\$ <u>2,000.00</u>	

\*This same figure should be entered on line 1 of all reports filed this calendar year.

\*\*You must report the cash on hand at both the beginning of the reporting period and the close of the reporting period.

Note that the closing cash balance for the current reporting period appears on the next report as beginning cash on hand.

STATE OF IDAHO  
 OCT-2 11 08:19 AM '04

**Return This Report To:**  
**Ben Yursa**  
 Secretary of State  
 PO Box 83720  
 Boise ID 83720-0080  
 phone: (208) 334-2852  
 fax: (208) 334-2282

**Section V**

**CERTIFICATION**

I Thomas F. Loertscher, hereby certify that the information  
(name of Political Treasurer)  
 in this report is a true, complete and correct Campaign Financial Disclosure Report as  
 required by law.

*Thomas F. Loertscher*  
 \_\_\_\_\_  
 Signature of Political Treasurer

## DETAILED SUMMARY PAGE

Name of Candidate or Committee <b>Tom Loertscher</b>	Report Covering the Period From <u>10 / 18 / 04</u> to <u>11 / 12 / 04</u>
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<b>UNITEMIZED CONTRIBUTIONS</b>	
Contributions of Fifty Dollars (\$50.00) or Less This Period	
Total Number _____	Total Amount \$ _____
<b>UNITEMIZED EXPENDITURES</b>	
Expenditures of Less Than Twenty-Five Dollars (\$25.00) This Period	
Total Number <u>5</u>	Total Amount \$ <u>58.35</u>

	Total This Period
<u>1</u> Number of Schedule A pages Attached	
<b>Contributions</b>	
Unitemized Contributions (\$50 and less) from top of page	\$
Itemized Contributions (total all Schedule A sheets)	\$ 1,200.00
<b>Total Contributions</b> (also enter this figure on page 1, Section IV, line 3)	<b>\$ 1,200.00</b>
<u>1</u> Number of Schedule B pages Attached	
<b>Expenditures</b>	
Unitemized Expenditures (less than \$25) from top of page	\$ 58.35
Itemized Expenditures (total all Schedule B sheets)	\$ 674.00
Expenditures to Reduce Accounts Payable (total all Schedule C-2Bs - Payment this Period)	\$ 2,500.00
<b>Total Expenditures</b> (also enter this figure on page 1, Section IV, line 5)	<b>\$ 3,232.35</b>
<u>1</u> Number of Schedule C-2B pages Attached	
<b>Incurred Expenditures</b>	
Outstanding Balance from previous period (from previous report, page 1, Section IV, line 7)	\$ 4,500.00
Amount Incurred this period (Total all Schedule C-2Bs - Amount Incurred this Period)	+ \$
Subtotal	= \$ 4,500.00
Payment this Period (Total all C-2Bs - Payment this Period)	- \$ 2,500.00
<b>Total Outstanding Balance at close of this period</b> (enter on page 1, Section IV, line 7)	<b>= \$ 2,000.00</b>
____ Number of Schedule C-2A pages Attached	
<b>Pledged Contributions</b>	
Amount Pledged this Period	\$

**SCHEDULE A**  
**ITEMIZED CONTRIBUTIONS**  
of more than Fifty Dollars (\$50.00) this period

Name of Candidate or Committee  
Tom Loertscher

Date/ Receipt For	Full Name, Mailing Address and Zip Code of Contributor/Lender	Column A	Column B	Column C
		Cash or Check	In-Kind (non-monetary)	Loans
10 / 30 / 04	1. Idaho Podiatric Medical Assoc PAC 270 N 27th St Ste B Boise, ID 83702-4741	\$ 250.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 250.00 Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
11 / 04 / 04	2. Employers Resource 1301 S Vista Ste 200 Boise, ID 83705	\$ 200.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 200.00 Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
10 / 22 / 04	3. Monsanto Company 800 N Lindberg St Louis, MO 63617	\$ 250.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 250.00 Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
10 / 22 / 04	4. Robert L Geddes Senate Campaign 370 Mountain View Ave Soda Springs, ID 83276	\$ 500.00	\$	\$
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		\$ 500.00 Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
____ / ____ / ____	5.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
____ / ____ / ____	6.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
____ / ____ / ____	7.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
____ / ____ / ____	8.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
____ / ____ / ____	9.	\$	\$	\$
<input type="checkbox"/> Primary <input type="checkbox"/> General		\$ Calendar Year To Date	\$ Calendar Year To Date	\$ Calendar Year to Date
Subtotals of Columns A, B & C		\$ 1,200.00	\$ 0.00	\$ 0.00
Total This Page (add columns A, B & C)				\$ 1,200.00

**SCHEDULE B  
ITEMIZED EXPENDITURES**

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

Name of Candidate or Committee Tom Loertscher
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		Column A	Column B
Date	Full Name, Mailing Address and Zip Code of Recipient	Cash or Check	In-Kind (non-monetary)
10 / 20 / 04	1. Evan Frasure for Senate 2950 Trevor Pocatello, ID 83201	\$ 500.00	\$
<b>Purpose of Above Expenditure:</b> Campaign Contribution			
10 / 20 / 04	2. ACG PAC PO Box 7386 Boise, ID 83707	\$ 100.00	\$
<b>Purpose of Above Expenditure:</b> Canceled by ACG PAC, written on wrong account			
10 / 25 / 04	3. Stamps.com 14093 Balboa Blvd Sylmar, CA 91342	\$ 74.00	\$
<b>Purpose of Above Expenditure:</b> Postage			
/ /	4.	\$	\$
<b>Purpose of Above Expenditure:</b> Partial loan repayment			
/ /	5.	\$	\$
<b>Purpose of Above Expenditure:</b>			
/ /	6.	\$	\$
<b>Purpose of Above Expenditure:</b>			
Subtotals of Columns A & B		\$ 674.00	\$ 0.00
Total This Page (add columns A & B)			\$ 674.00

**SCHEDULE C-2B**  
**EXPENDITURES INCURRED (Debts and Obligations) & PAYMENT MADE ON DEBT**

Name of Candidate or Committee <b>Tom Loertscher</b>	Report Covering the Period From <u>10 / 18 / 04</u> to <u>11 / 12 / 04</u>
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**Directions:** Complete this schedule if you incurred an obligation during this reporting period to purchase an item or service or made a payment on debt. Do not include these entries on Schedule B.

<b>Line 1: Incurred Expenditures of Less Than \$25.00 This Period:</b>	Total Number _____	Total Amount \$ _____
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**Expenditures Incurred (Debts and Obligations) or Payment Made on Debt of \$25.00 or More This Period:**

	Full Name, Mailing Address and Zip Code or Creditor	Purpose of Expenditure																
1.	Tom Loertscher 1357 Bone Rd Iona, ID 83427	Debt Repayment																
<table style="width:100%; border:none;"> <tr> <td style="width:55%;">Outstanding Balance beginning this period.. \$</td> <td style="width:15%; text-align:right;">4,500.00</td> <td style="width:10%;"></td> <td style="width:20%;">Date Incurred _____</td> </tr> <tr> <td>Amount Incurred this period..... \$</td> <td></td> <td></td> <td>Date of Payment <u>11/10/04</u></td> </tr> <tr> <td>Payment this period..... \$</td> <td style="text-align:right;">2,500.00</td> <td></td> <td></td> </tr> <tr> <td>Outstanding Balance..... \$</td> <td style="text-align:right;">2,000.00</td> <td></td> <td></td> </tr> </table>			Outstanding Balance beginning this period.. \$	4,500.00		Date Incurred _____	Amount Incurred this period..... \$			Date of Payment <u>11/10/04</u>	Payment this period..... \$	2,500.00			Outstanding Balance..... \$	2,000.00		
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Amount Incurred this period..... \$			Date of Payment <u>11/10/04</u>															
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Outstanding Balance..... \$	2,000.00																	
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**Totals of this Page**

<b>Line 2: Amount Incurred This Period</b> (Carry forward to Page 2, Under Incurred Expenditures)	\$ _____
<b>Line 3: Payment This Period</b> (Carry forward to Page 2, under Expenditures and Incurred Expenditures)	\$ <u>2,500.00</u>