

LOBBYIST ANNUAL REPORT FORM JAN 30 11 24 04 THIS SPACE FOR OFFICE USE ONLY



State of Idaho
Ben Yauras
Secretary of State

SECRETARY OF STATE
STATE OF IDAHO

To Be Filed By:
L-2 LOBBYISTS
(Sec. 67-6619)

(Type or print clearly)
See instructions at bottom of page

Lobbyist's name and permanent business address: Brian Bolton 535 Eastland Drive Twin Falls, Idaho 83301-7442	Date prepared: 1/30/04	Period covered: <input checked="" type="checkbox"/> year ending (Mo.) (Day) (Yr.)
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Category of Expenditure <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	Total Expenditure	Proportional amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4
Entertainment	\$ 0.00	\$	\$	\$	\$
Food and Refreshment	0.00				
Living Accommodations	0.00				
Advertising	0.00	THERE WERE	NO REPORTABLE	EXPENDITURES	MADE OR
Travel	0.00	INCURRED ON	BEHALF OF	LOBBYIST'S	EMPLOYER
Telephone	0.00	BY LOBBYIST			
Office Expenses	0.00				
Other Expenses or Services	0.00				
Total	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Item 2 Date	Place	Amount	The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office.
			Names of Legislators & Public Officials in Group
NO	EXPENDITURES OVER \$50	REQUIRED	TO BE REPORTED

Continued on attached page(s)

INSTRUCTIONS	Item 3 Employer(s) Name(s) and Address(es)
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code	No. 1 Idaho Soft Drink Association c/o Nagel Beverage Company 5465 West Irving Boise, Idaho 83706
Filing deadline: Annual report is due on January 31st.	No. 2
TO BE FILED WITH: Ben Yauras Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	No. 3
	No. 4

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.		
Date	Amount	Name of Legislator Receiving or Benefited	
	N/A - NO	EXPENDITURES MADE OR INCURRED PER ITEM 4	

Item 5	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the lobbyist was supporting or opposing.			LEGISLATIVE SUBJECT IDENTIFICATION		
Subject Code (from table)	Bill, Resolution or Other Legislative Ident. No.	Appropriation Bill Number and Section Number	Code	Subject	Code	Subject
N/A	N/A		01	Agriculture, horticulture, farming, and livestock	17	Health service, medicine, drugs and controlled substances, health insurance, hospice
			02	Amusements, games, athletics and sports	18	Higher education
			03	Banking, finance, credit and investments	19	Housing, construction, codes
			04	Children, minors, youth, senior citizens	20	Insurance (excluding health insurance)
			05	Church and religion	21	Labor, salaries and wages, collective bargaining
			06	Consumer affairs	22	Law enforcement, courts, judges, crimes, prisons
			07	Ecology, environment, pollution, conservation, zoning, land and water use	23	License, permits
			08	Education	24	Liquor
			09	Elections, campaigns, voting, political parties	25	Manufacturing, distribution and services
			10	Equal rights, civil rights, minority affairs	26	Natural resources, forest and forest products, fisheries, mining and mining products
			11	Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds	27	Public lands, parks, recreation
			12	Government, county	28	Social insurance, unemployment insurance, public assistance, workmen's compensation
			13	Government, federal	29	Transportation, highways, streets and roads
			14	Government, municipal	30	Utilities, communications, television, radio, newspaper, power, CATV, gas
			15	Government, special districts	31*	Other (please specify) _____
			16	Government, state		

Brian Bolton

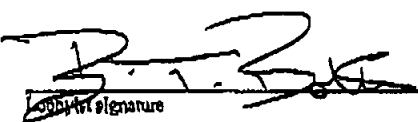
Employer No. 1 signature Date

Employer No. 2 signature Date

Employer No. 3 signature Date

Employer No. 4 signature Date

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6024 Idaho Code.

 1/29/04

Lobbyist signature Date

*The making and enforcement of the laws of the State of Idaho and the Policy underlying same.