

## LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Yursa  
Secretary of State

To Be Filed By:

L-3

LOBBYISTS  
(Sec. 67-6619)Page \_\_\_\_\_ of \_\_\_\_\_ Page(s)  
THIS SPACE FOR OFFICE USE ONLY(Type or print clearly in black ink)  
See instructions at bottom of page

Lobbyist's name and permanent business address

STEVEN E. RECTOR  
P.O. BOX 7899  
BOISE, IDAHO 83702

Date prepared

2-14-05

Period covered

☐ month ending(Mo.) (Day) (Yr.)  
1 | 31 | 05Item  
1

Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.

Category of Expenditure  
Reimbursed Personal Living and Travel  
Expenses Pertaining to Lobbying Activity  
Do Not Have to be Reported\* Total Amount for  
All EmployersProportionate 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

Food and Refreshment

Living Accommodations

Advertising

Travel

Telephone

Other Expenses or Services

Total

\*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be entered on Page 1.

Item  
2

The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office.

Date

Place

Amount

Names of Legislators &amp; Public Officials in Group

POSTED

☐ Continued on attached page(s)

## INSTRUCTIONS

Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.

Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.

TO BE FILED WITH:

Ben Yursa  
Secretary of State  
PO Box 83720  
Boise, ID 83720-0080Item  
3

Employer(s) Name(s) and Address(es)

No.1

Idaho Housing & Finance Association  
P.O. BOX 7899 SLS W. RYAN  
BOISE, 83702

No.2

No.3

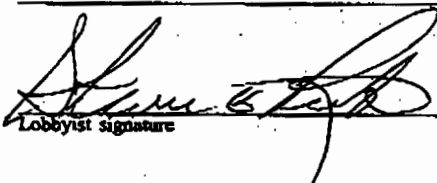
No.4

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

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. Number	Appropriation Bill Number and Section Number	

01 Agriculture, horticulture, farming, and livestock	17 Health service, medicine, drugs and controlled substances, health insurance, hospitals
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, televisions, radio, newspaper, power, CATV, gas
15 Government, special districts	31 Other (please specify) _____
16 Government, state	

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.

 2-14-05  
Lobbyist Signature Date