

# LOBBYIST MONTHLY REPORT FORM

Page 1 of 5 Page(s)  
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06 FEB -8 AM 11:00

SECRETARY OF STATE  
STATE OF IDAHO



**State of Idaho**  
  
Ben Yursa  
Secretary of State

To Be Filed By:  
  
**L-3** LOBBYISTS  
(Sec. 67-6619)

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

SULLIVAN & REBERGER  
PO Box 1703  
Boise, ID 83701

Date prepared

2/2/06

Period covered

month ending

(Mo.) (Day) (Yr.)  
1 | 31 | 06

ANOREA K MILIEM

**Item 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 <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	* Total Amount for All Employers	Proportionate 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	\$ 164.75	\$ 155.26	\$ 0	\$ 0	\$ 0
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
<b>Total</b>	\$ 164.75	\$ 155.26	\$ 0	\$ 0	\$ 0

\*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.

Item	Date	Place	Amount	Names of Legislators & 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 83720-0080  
Phone: (208) 334-2852 Fax: (208) 334-2282

**Item 3** Employer(s) Name(s) and Address(es)

No.1 ASSOCIATED GEN'L CONTRACTORS  
110 N. 27th  
BOISE ID 83702

No.2 ADVANTAGE WORKERS COMP  
PO BOX 571918 SLC UT 84157

No.3 Clear Springs Foods  
PO BOX 712  
Boise ID 83316

No.4 St. Anthony St 820  
161 St. Paul MN 55103

# LOBBYIST MONTHLY REPORT FORM

Page 2 of 5  
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**State of Idaho**  
  
Ben Yursa  
Secretary of State

To Be Filed By:  
  
**L-3** LOBBYISTS  
(Sec. 67-6619)

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

SULLIVAN & REBERGER PO Box 1703 Boise, ID 83701  <i>Andrea K Michm</i>	Date prepared  <i>2/2/06</i>	Period covered <input checked="" type="checkbox"/> month ending  (Mo.) (Day) (Yr.) <i>1   31   06</i>
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**Item 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 <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	* Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No 5	Employer No 6	Employer No 7	Employer No 8
Entertainment	\$ _____	<i>0</i>	<i>0</i>	<i>949</i>	<i>0</i>
Food and Refreshment	\$ _____				
Living Accommodations					
Advertising					
Travel	<i>See page 1</i>				
Telephone					
Other Expenses or Services					
<b>Total</b>	\$ _____	<i>0</i>	<i>0</i>	<i>949</i>	<i>0</i>

\*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 & Public Officials in Group

Continued on attached page(s)

INSTRUCTIONS	Item 3 Employer(s) Name(s) and Address(es)
<p><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code.</p> <p><b>Filing deadline:</b> Monthly reports due within ten (10) days of the month for activities of the past month.</p> <p><b>TO BE FILED WITH:</b>                      Ben Yursa                      Secretary of State                      PO Box 83720                      Boise, ID 83720-0080                      Phone: (208) 334-2852 Fax: (208) 334-2282</p>	<p>No 5 <i>Idaho Sanitary Services</i>                      PO Box 626                      Meridian ID 83642</p> <p>No 6 <i>Krispy Kreme</i>                      313 Pilot RD Ste B                      Las Vegas NV 89119</p> <p>No 7 <i>MATT State Assoc. Inc</i>                      515 King Str #300                      Alexandria VA 22314</p> <p>No 8 <i>Motion Picture Assn of America</i>                      1600 84th St. NW                      Washington DC 20006</p>

Community Financial Services Assoc of America



State of Idaho  
Ben Ysursa  
Secretary of State

# LOBBYIST MONTHLY REPORT FORM

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**L-3 LOBBYISTS**  
(Sec. 67-6619)

Page 3 of 5 page(s)  
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See instructions at bottom of page

SULLIVAN & REBERGER  
PO Box 1703  
Boise, ID 83701

Date prepared

Period covered

month ending

*Andrea K. Michm*

*2/2/06*

(Mo.) (Day) (Yr.)  
*1 | 31 | 06*

Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	* Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No 9	Employer No 10	Employer No 11	Employer No 12
Entertainment	\$ _____	\$ <i>6</i>	\$ <i>0</i>	\$ <i>0</i>	\$ <i>0</i>
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Advertising	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Travel	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Telephone	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other Expenses or Services	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>Total</b>	\$ _____	\$ <i>6</i>	\$ <i>0</i>	\$ <i>0</i>	\$ <i>0</i>

\*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 & Public Officials in Group	

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 9 Pacific Northwest Generating Corp. 711 NE Halsey Ste 200 Portland OR 97232
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.	No 10 West Communication 999 Main St 11th Fl Boise ID 83702
TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	No 11 IDAHU INFORMATION CONSORT 999 Main # 910 Boise ID 83702
	No 12 TTANS CANADA # 900 1400 SW 5th Portland OR 97201

# LOBBYIST MONTHLY REPORT FORM

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Ben Yursa  
Secretary of State

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**L-3 LOBBYISTS**  
(Sec. 67-6619)

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See instructions at bottom of page

SULLIVAN & REBERGER PO Box 1703 Boise, ID 83701  <i>Andrea K. Nichm</i>	Date prepared  <div style="font-size: 2em; text-align: center;"><i>2/2/06</i></div>	Period covered <input checked="" type="checkbox"/> month ending  (Mo.) (Day) (Yr.) <div style="font-size: 1.5em; text-align: center;">                     1   31   06                 </div>
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**Item 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 <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	* Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. <u>13</u>	Employer No. <u>14</u>	Employer No. <u>15</u>	Employer No. <u>16</u>
Entertainment	\$ _____	\$ <u>e</u>	\$ <u>e</u>	\$ <u>e</u>	\$ <u>e</u>
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations	_____	_____	_____	_____	_____
Advertising	_____	_____	_____	_____	_____
Travel	_____	_____	_____	_____	_____
Telephone	_____	_____	_____	_____	_____
Other Expenses or Services	_____	_____	_____	_____	_____
<b>Total</b>	\$ _____	\$ <u>6</u>	\$ <u>6</u>	\$ <u>6</u>	\$ <u>6</u>

\*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 & Public Officials in Group

Continued on attached page(s)

INSTRUCTIONS	Item 3 Employer(s) Name(s) and Address(es)
<b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code.	<div style="font-size: 1.5em; margin-bottom: 10px;"><u>13</u> <b>BATELLE ENERGY ALLIANCE</b> PO Box 1625 ID. Falls ID 83415</div>
<b>Filing deadline:</b> Monthly reports due within ten (10) days of the month for activities of the past month.	<div style="font-size: 1.5em; margin-bottom: 10px;"><u>14</u> <b>TNT FIREWORKS</b> 16526 Shore Dr. NE 98155 Lake Forest Park WA 5821</div>
<b>TO BE FILED WITH:</b>  Ben Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	<div style="font-size: 1.5em; margin-bottom: 10px;"><u>15</u> <b>CH2M-W6 IDATA LLC</b> PO Box 1625 ID Falls ID 83417</div>
	<div style="font-size: 1.5em;"><u>16</u> <b>NORTHWEST HEARTH PATIO</b> PO Box 2016 EDMONDS WA 98020-9576</div>



State of Idaho  
Ben Ysursa  
Secretary of State

# LOBBYIST MONTHLY REPORT FORM

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**L-3 LOBBYISTS**  
(Sec. 67-6619)

Page 5 of 5 Page(s)  
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1 SULLIVAN & REBERGER PO Box 1703 Boise, ID 83701 <i>ANDREA K MITCHELL</i>	Date prepared <i>2/2/06</i>	Period covered <del>1</del> month ending (Mo.) (Day) (Yr.) <i>1   31   06</i>
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Item 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 Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. 17	Employer No. 18	Employer No. 19	Employer No. 20
Entertainment	\$ _____	\$ <i>6</i>	\$ <i>6</i>	\$ _____	\$ _____
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Advertising	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Travel	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Telephone	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other Expenses or Services	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>Total</b>	\$ _____	\$ <i>6</i>	\$ <i>6</i>	\$ _____	\$ _____

\*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 & Public Officials in Group	

Continued on attached page(s)

INSTRUCTIONS	Item 3	Employer(s) Name(s) and Address(es)
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	No. 18	WASHINGTON GROUP INTL 2345 Crystal Dr #708 Arlington VA 22202
	No. 19	/
	No. 20	/

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.		
	Subject Code (from table)	Bill, Resolution or Other Legislative Ident. Number	Appropriation Bill Number and Section Number

**LEGISLATIVE SUBJECT IDENTIFICATION**

- |             |   |             |  |
|-------------|---|-------------|--|
| <b>Code</b> | <b>Subject</b>  | <b>Code</b> | <b>Subject</b>   |
| 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.

Andrea Mih 2/2/06  
 Lobbyist signature Date



State of Idaho  
Ben Ysursa  
Secretary of State

**LOBBYIST MONTHLY REPORT FORM**

To Be Filed By:  
**L-3 LOBBYISTS**  
(Sec. 67-6619)

06 FEB 10 PM 12:03  
SECRETARY OF STATE  
STATE OF IDAHO  
Page 1 of 1 Page(s)  
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*Amended*

1 <b>SULLIVAN &amp; REBERGER</b> PO Box 1703 Boise, ID 83701 <i>Andrea K Mihm</i>	Date prepared <i>2/10/06</i>	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) <i>1   31   06</i>
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Item 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 Employers	Proportionate 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	\$ <i>1894</i>	\$ <i>1894</i>	\$ _____	\$ _____	\$ _____
Food and Refreshment	_____	_____	_____	_____	_____
Living Accommodations	_____	_____	_____	_____	_____
Advertising	_____	_____	_____	_____	_____
Travel	_____	_____	_____	_____	_____
Telephone	_____	_____	_____	_____	_____
Other Expenses or Services	_____	_____	_____	_____	_____
<b>Total</b>	\$ <i>1894</i>	\$ <i>1894</i>	\$ _____	\$ _____	\$ _____

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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 & Public Officials in Group

**POSTED**

Continued on attached page(s)

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	No.1 <i>North state Associates for Community Financial SIKS 515 King # 300, Alexandria VA 22314</i>
	No.2
	No.3
	No.4

