

# 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

06 APR 10 PM 5:00  
SECRETARY OF STATE  
STATE OF IDAHO

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

Lobbyist's name and permanent business address <b>Bob Naerebout</b> 139 River Vista Place, Suite 102 Twin Falls, Idaho 83301	Date prepared <p style="text-align: center;">April 10, 2006</p>	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) <p style="text-align: center;">03   31   06</p>
---------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------

Item 1 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	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	\$ 1,151.00	\$ 1,151.00	\$ _____	\$ _____	\$ _____
Food and Refreshment	950.00	950.00	_____	_____	_____
Living Accommodations	600.00	600.00	_____	_____	_____
Advertising	618.00	618.00	_____	_____	_____
Travel	285.00	285.00	_____	_____	_____
Telephone	250.00	250.00	_____	_____	_____
Other Expenses or Services	3,854.00	3,854.00	0.00	0.00	0.00
<b>Total</b>	<b>\$ 3,854.00</b>	<b>\$ 3,854.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>

\*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
			0.00	

Continued on attached page(s)

<p style="text-align: center;"><b>INSTRUCTIONS</b></p> <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 style="text-align: center;">Item 3 Employer(s) Name(s) and Address(es)</p> <p>No.1 Idaho Dairymen's Association</p> <p>No.2 139 River Vista Place Suite 102 Twin Falls, Idaho 83301</p> <p>No.3</p> <p>No.4</p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

