LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619)



OF DEC 31 AM 9: 03

SECRETARY OF STATE STATE OF IDAHO

			learly in black ink) s at bottom of page							UNAUU		
Lobbyist's name and permanent business address							Date prepared			Period covered		
Jeffrey C. Crumrine							• •			year endi	ng	
			tion Services, Inc	: .					-			
P. 0. Box 109					40 /00 /0007				(Mo.)	(Day)	(Yr.)	
Twin Falls, ID 83303-0189							12/28/2007		12	31	2007	
Item 1	Totals	of all reportab	ole expenditures made or	incurred by	y Lobb	yist or	by Lobbyist's Empl	oyer on be	half of Lobb		yer.	
Ca	tegory of Ex	ng and Travel	* Total Amount for	Proportional Item 3, at			ntributed by each emp	loyer (Iden	tify employer	s, under		
	Not Have to b	bbying Activity e Reported	All Employers	Employer No.		. 1	Employer No. 2	Employer No. 3		Employer No. 4		
	inment nd Refreshm	nent	s <u>0</u>	s0)		S	\$		\$		
Living Accommodations			0	0								
Advert	ising		0	0)		-					
Travel			0	0)							
Telephone			0	0)					<u></u>		
Other Expenses or Services 206.00			206.00									
		Total	\$ <u>206.00</u>	\$ _206.	00]:	S	\$		\$		
**	When the num	ber of employers	s you are reporting for requi	 ires multiple	L-2 for	ms to be	filed a total amount for	i or all employ	vers should be	entered on Pa	ige 1.	
Item			liture of more than fifty									
2	Date		Place		Ar	nount	Names	of Legislato	rs & Public Of	ficials in Grou	ир	
			NONE									
	Continued on	attached page(s)		ı								
INSTRUCTIONS						Item 3		Employer(s) Name(s) and Address(es)				
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code. Filing deadline: Annual report is due on January 31st.					on	No.1	Magic Valley Rehabilitation Services, I P. O. Box 189 Twin Falls, ID 83303-0189				Inc.	
						No.2						
то	BE FILED	WITH:				-						
Ben Ysursa Secretary of State PO Box 83720					No.3							
	Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282											

tem	personal property to any Legislator, or for or on behalf of a									
	Da	ate	Amount		Name of Legislator Receiving or Benefited					
subject from to	or Hou the Lo	use Bill, bbbyist w Bill, Re Legislan	Resolution or other as supporting or of	NONE NONE Appropriation Bill Number and Section Number NONE NONE		вјест	IDENTIFICATION Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways,			
				above is a true, complete and 67-6624 Idaho Code.	Employer No. 2 signature Employer No. 3 signature Employer No. 4 signature	30	streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify) Rehabilitat 12/28/2007 Date Date Date			