Rev. 06/2006



TO BE FILED WITH:

Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080

Phone: (208) 334-2852 Fax: (208) 334-2282

State of Idaho

Ben Ysursa Secretary of State

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LOBBYISTS (Sec. 67-6619)

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EUNETANN OF STATE
STATE OF IDAHO

(Type or print clesses instructions a									
Lobbyist's name and permanent business address				Date prepared			Period covered		
M. Allyn Dingel, Jr. The Alaska Center 1020 W. Main St., Suite! Boise, ID 83702		400	01	01-08-08		(Mo.) (Day) (Yr.)			
		- incomed by Yahbu	rigt on bu l	chhrist's Rmal	over on behalf o	f Lobbyi	31	107	
Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's Employer. Category of Expenditure Redmburged Personal Living and Travel *Total Amount for Item 3, at bottom of page.)									
Expenses Penalthing to Lobbying Activity Do Not Have to be Reported	Afi Employers	Employer No. 1	P	Employer No. 2		Employer No. 3 Bm		No. 4	
Entertainment Food and Refreshment Living Accommodations	s	\$	_ \$		s				
Advertising Travel	0		_						
Telephone									
Other Expenses or Services									
Total	\$ <u>-0 -</u>	\$	_ \$ _		\$		\$		
*When the number of employers yo Item The totals of each expend									
2 Date	Place		nount		lators, Public and				
NIA NI		N/	A	NJf					
Continued on attached page(s)			Item 3		nelower(a) None(deng(en)		
INSTRUCTIONS					nployer(s) Name(
Who should file this form: Any labbyist registered under Section 67-6617 Idaho Code			No. 1 1201 "K" St., Ste 920, Sociamento, CAS						
Filing deadline: Annual repo Executive L	nt is due on January 31s obbyist sami-annual repo		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 interpersonal property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.								
	Date	Amount	Nam	Name of Legislator, Public or Executive Official Receiving or Benefiting					
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			ion, the number of the Senate		BJECT IDENTIFICATION				
5		was emblouting or of Resolution of other	legislative activity in which posing.	Code Suhject	Code Subject				
Subjection OOOOO	REPART LITTLITT TITUDO ON	Solution or Other Number of Other Other of Other Other of	Appropriation Bill Number and Section Number	Ol Agriculture, horticulture, faqming, and livestock O2 Amusements, games, nthletics and sports O3 Banking, finance, credit and invastments O4 Children, minors, youth, senior citizens O5 Church and religion O6 Consumer affairs O7 Ecology, environment, pullution, conservation, zoning, land and water use O8 Education O9 Elections, campaigns, yoting, political parties O6 Equal rights, civil rights, minority affairs O7 Government, fluancing, taxation, revenue, budget, appropriations, bids, fees, funds O6 Government, county O7 Government, municipal O7 Government, municipal O7 Government, state	17 Health service, medicine, of and controlled substances, insurance, hospitals 18 Higher education 19 Housing, construction, codd Insurance (excluding health insurance) 20 Insurance (excluding health insurance) 21 Labor, salaries and wages, collective bargaining 22 Law enforcement, courts, judges, crimes, prisons 23 License, permits 24 Liquor 25 Manufacturing, distribution services 26 Natural resources, forest at forest products, fisheries, rand mining products 27 Public lands, parks, recreat Social insurance, unemplo insurance, public assistance workmen's compensation 29 Transportation, highways, streets and mods 30 Utilities, communications, televixions, radio, nawspar power, CATV, gas 31 Other (please specify)	health ces h and mining tion yment e,			
Item 6	Identify any contract bid	or bid process, fins	ecision, procurement, meisl services agreement or	CBRTIFICATION: I bereby certify the correct statement in accordance with a coordance with a	Section 67-6624 Iriaho Code.	- - [108]			
	bond lobbyis	t was supporting or	oppostug.						
	No	rl		Employer No. 1 zignsture Employer No. 2 signsture	Date				
				Employer No. 3 signature	Date				
				Buployer No. 4 signature	Date	-			