

## State of Idaho

LOBBYIST R	EPORT FORM
ANNUAL	SEMI-ANNUAL

Page	of	Page(s)
THES SPACE	E FOR OFF	CE USE ONL

		Ben Ysursa Secretary of St		To Be Filed L-2	LOBB	YISTS			STATE		
		(Type or print clea See instructions at			(Sec. 6	7-6619)			PIAIL	UF IDA	НО
Lobbyis	's name an	permanent busines	ss address			Date prepa	red		Period c	overed	
-	Fischer									year endi	ing
		2 (note: new a	ddress)						(Mo.)	(Day)	(Yr.)
Boise	, ID 837	11					1,13.09	9	12	31	08
Item 1	То	tals of all reportat	ole expenditures made o	r incurred b	y Lobbyis	t or by Lo	obbyist's Empl	oyer on beha	lf of Lobby	ist's Emplo	yer.
Ca	irsed Person	Expenditure at Living and Travel	*Tota! Amount for		ate amounts		d by each emple	oyer (Identify	employers,	under	
		to Lobbying Activity to be Reported	All Employers	Employer No. 1		Employer No. 2		Employer No. 3		Employer No. 4	
Entertar Food ar	inment nd Refrest	ment	\$	s		s		s		\$	
Living	Accommo	dations									
Adverti	sing										
Travel				·		_					
Telepho	ne					_					
Other F	xpenses o	r Services	52.89		52.89						
		Total	s52.89	s	52.89	_ s	0.00	s	0.00	5	0.00
*When t	he number	of employers you a	 re reporting for requires m	 ultiple L-2 fo	rms to be fi	led a total :	amount for all e	! mployers shou	ld be entered	on Page 1.	
		ls of each expend (s) of their housel	liture of more than seve	nty-five do	llars (\$75)	for a leg	islator, other l	nolder of pub	lic office,	executive o	fficials and
Item-		(s) of their flouser			Names of Legislators, Public and Executive Officials						
	Date		Place		Amou		nount and Household Members in Group				
		i									
		1									
Continued on attached page(s)  INSTRUCTIONS  Who should file this form: Any lobbyist registered under Section						Item Employer(s) Name(s) and Address(es)					
						Idaho Values Alliance					-
	6617 Idah		ny toodytsi registered ur	naer Secuoi	n N	D. I	Box 44882		address	)	#
Fili	ng deadli	•	is due on January 31st. bbyist semi-annual repor		31st. N	lo. 2					
TO BE FILED WITH:  Ben Ysursa  Secretary of State  PO Box 83720						No. 3					
	P	Boise,	ID 83720-0080 2852 Fax: (208) 334-2	2282	N	lo. 4					

Itema 4	Exper	nditures	made by the lobby	ist or by the lobbyist's emple ehalf of any Legislator, Pul	y the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal f any Legislator, Public or Executive Official or Household Member(s).							
•						lator, Public or Executive Official and Household Member(s) Receiving or Benefiting						
Item	Subje	ct matter	of proposed legislat	ion, the number of the Senate	T	LEGISLATIVE SUI	RIFCT	IDENTIFICATION				
5	or Ho	use Bill,	Resolution or other	legislative activity in which		DEGISERITE SUI						
	the Lo	obbyisi w	as supporting or opp	posing.	1	Subject		Subject				
Subject			esolution or Other	Appropriation Bill Number	01	Agriculture, horticulture, farming, and livestock	17	Health service, medicine, drugs and controlled substances, health				
(from t	7		SCR128	and Section Number	02	Amusements, games, athletics and sports Banking, finance, credit and	18 19	insurance, hospitals Higher education Housing, construction, codes				
	22 17		H417 H464		04	investments Children, minors, youth,	20	Insurance (excluding health insurance)				
22		H465				senior citizens	21	Labor, salaries and wages,				
14		S13B1			05	Church and religion		collective bargaining				
17	-				06	Consumer affairs Ecology, environment, pollution,	22	Law enforcement, courts, judges, crimes, prisons				
			H654		\	conservation, zoning, land and	23	License, permits				
1.	i		H439			water use	24	Liquor				
16	l l	S1283			0B 09	Elections committee voting	25	Manufacturing, distribution and services				
11	0		S1323		10 11 12 13 14 15 16	Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	26 27 28 29 30	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, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)				
						ERTIFICATION: I hereby certify the correct statement in accordance with S						
6	contrac	t bid or b	e, ratemaking decision and process, financial as supporting or opp	services agreement or	ן נ	obyist signature		Date				
					_	mployer No. 1 signature mployer No. 2 signature	Q	Date 1.26.09 Date				
					Ei	mployer No. 3 signature		Date				
					J E	mployer No. 4 signature		Date				