State of Idaho

Ben Ysursa Secretary of State

LOBBYIST REPORT FORM

ANNUAL

☐ SEMI-ANNUAL

To Be Filed By:

LORRVISTS

			J= Z	Sec. 67-66		2009 JAN 13	3 All 8: 08		
		early in black ink) at bottom of page	_			SECRETAH	Y OF STATE		
Lobbyis	t's name and permanent busin			Date p	repared	STATIPefi	od dovered		
kill	AND INEEKS	CPTPA	<u> </u>		, ,		year ending		
025	a HW4 12		<i>i/i</i>		1/13/20	009	- 2008		
ZOF	TNO, IDAHC	83544			7 - 7	, (1)	Mo.) (Day) (Yr.)		
Item 1	Totals of all reports	able expenditures made o	r incurred by Lo	bbyist or by	Lobbyist's Emp	loyer on behalf of Lo	obbyist's Employer.		
Reimb	ategory of Expenditure ursed Personal Living and Travel es Pertaining to Lobbying Activity	*Total Amount for All Employers	Item 3, at botto	m of page.)					
	o Not Have to be Reported		Employer No	0. 1	Employer No. 2	Employer No. 3	Employer No. 4		
Enterta Food at	inment nd Refreshment	\$ 135.51	\$			\$	\$		
Living	Accommodations	336.35							
Advert	ising			_			_		
Travel		142,51		_			_		
Telepho	one						_		
Other Expenses or Services									
	Total	s_6/437	\$			\$	\$		
*When	the number of employers you	are reporting for requires m	 ultiple L-2 forms to	o be filed a to	otal amount for all e	mployers should be ent	ered on Page 1.		
	The totals of each exper	diture of more than seve					ce, executive officials and		
Item-	member(s) of their house	ehold.			Names of Legislators, Public and Executive Officials				
2	Date	Place		Amount		and Household Members in Group			
	Continued on attached page(s)								
	INS	TRUCTIONS		Item 3	E	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. Executive Lobbyist semi-annual report due July 31st.					CLEARWHIEL POTLATER TIMBER PROTECTION OF THE PROTECT ASSESSED BOSTA				
TO BE FILED WITH: Ben Ysursa Secretary of State				No. 3					
PO Box 83720 Boise, ID 83720-0080									

No. 4

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

	Evner	ditures	made by the Jobby	ist or by the lobbyist's emplo	over it	the nature of contributions of mo	nev or o	ther tangible or intengible personal			
Item 4				st or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal half of any Legislator, Public or Executive Official or Household Member(s).							
	Date		Amount	Name of Legislator, Public or Executive Official and Household Member(s) Receiving or Benefiting							
Item 5 Subject (from	Subject matter of proor House Bill, Reso the Lobbyist was su		Resolution or other	ion, the number of the Senate legislative activity in which posing. Appropriation Bill Number and Section Number	01	LEGISLATIVE SUBJECT IDENTIFICATION Code Subject Code Subject					
					02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education 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, special districts Government, state	19 20 21 22 23 24 25 26 27 28 29 30	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, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)			
Item 6	contrac	t bid or b	e, ratemaking decision oid process, financial as supporting or opp	services agreement or	- E	CERTIFICATION: I hereby certify to correct statement in accordance with accordance with correct statement in accordance with correct statement in accordance with accordance with a correct statement in accordance with a correct state	Section 6				
					_	Employer No. 4 signature		Date			