Rev. 06/2006

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page___of___Page(s)
THIS SPACE FOR OFFICE USE ONLY

08 MAR -5 AM 8: 40

- SIALL AHO

(Type or print clearly See instructions at bo		STATE	OF ID					
Lobbyist's name and permanent business	Date	prepared	Period	Period covered				
Patrick V. Collins				1	en anonth	ding		
P.O. Box 1617						"	_	•
Boise, ID 83701			- 1	3-4-08			(Day)	(Yr.)
						2	29	08
Item Totals of all reportable	e expenditures made or	incurred by Lol	byist or b	y Lobbyist's Empl	oyer on be	half of Lobb	yist's Emplo	yer.
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	Proportionate arr Item 3, at botto		nts contributed by each employer (Identify employers, under of page.)					
Do Not Have to be Reported	All Employers	Employer No	. 1	Employer No. 2		yer No, 3	3 Employer No. 4	
Entertainment Food and Refreshment	s	s	\$		s		s	
Living Accommodations			<u> </u>	_				
Advertising			_ _					
Travel]			
Telephone			— I -					
Other Expenses or Services			- -					
Just Expenses of Services			-		<u> </u>			
Total S	0.00	s0	.00 s	0.00	s	0.00	s	0.00
*When the number of employers you a	are reporting for require	s multiple L-2 fo	ms to be f	filed a total amount	for all em	ployers should	be entered	on Page 1,
Item The totals of each expenditur		ilars (\$50) for a	egislator,					
2 Date	Place		mount	Names of Legis	lators, Publ	ic and Execut	ive Officials	in Group
Continued on attached page(s)				1				
Instri	Itėm 3	tess 3 Employer(s) Name(s) and Address(cs)						
Who should file this form: Any 67-6617 Idaho Code	No. 1 512 W. Bannock, Boise, ID 83702							
Filing deadline: Monthly report month for activities of the past mo	No. 2 Idaho Health Facilities Authority 1607 W. Jefferson St., Boise, ID 83702							
TO BE FILED WITH:				•				
Ben	Ysursa	No. 3						
	ry of State							
PO Bo Boise, ID								

Item 4	Expe	nditures onal prop	es made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible operty to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.							
	Date Amount Nam			me of Legislator, Public or Executive Official Receiving or Benefiting						
Item	-		, ,	ion, the number of the Senate		LEGISLATIVE SUE	JECT	IDENTIFICATION		
5				legislative activity in which						
Subject (from t	Code able)	Bill, Re Legislati	as supporting or op- solution or Other ve Ident. Number HB 523 BB 1380	Appropriation Bill Number and Section Number	Code 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and roligion 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	Code 177 18 19 20 21 22 23 24 25 26 27 28 29 30	Subject Health service, medicine, druga and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective hargaining 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)		
6	bid or		is, tinancial service	ision, procurement, contract, is or bond lobbyist was		CERTIFICATION: I hereby certificorrect statement in accordance we will be a statement of the control of the con				