Rev. 06/2006

State of Idaho

Boise, 1D 83720-0080

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

LOBBYIST ANNUAL REPORT FORM

To Be Filed By:





	300	Secretary of S			(Sec. 67	7-6619)		IO FEB	-1	AM 11: 16	5
			[.]	Annual			 Semi-Annu	ual 👉		5 1A	TE
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	30x 1703						12/31/20	09	(Mo.)	(Day)	(Yr.)
Boise	e, ID 837	' 01							12	31	09
Item 1	Tot	als of all reportab	ole expenditures made o	r incurred by	Lobbyi	ist or by	Lobbyist's Empl	oyer on behalf o	f Lobb	yist's Employ	er.
		Expenditure I Living and Travel	*Total Amount for	Proportionate Item 3, at be			uted by each empl	oyer (Identify en	ployer	s, under	
Expense	es Pertaining I	to Lobbying Activity be Reported	All Employers	Employe			Employer No. 2	Employer No	3	Employer 1	No. 4
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Telepho	one					- _			<u> </u>		
Other E	Expenses or	Services				- _					
			11/120:25				57172	71/x	99		
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Item	The total	s of each expendi	ture of more than fifty of	lollars (\$50) f	or a legi	islator, o					
2	Date		Place		Amo	unt	Names of Legis	lators, Public and	Execut	ive Officials in	n Group
	Continued o	n attached page(s)				·				_	
,		INST	RUCTIONS			Item 3	En	nployer(s) Name(s)	and Ad	ddress(es)	
	o should f 6617 Idaho		ny lobbyist registered u	nder Section	N	NO.		WORKERS C 8, SLC, UT 8		ENSATION	
Fili	ng deadli		t is due on January 31s bbist semi-annual repor		st.	No. 2	REVA NC ING 300 Hampder	C. n Ln #1100, B	ethes	da, M D 208	 314
ТО	BE FILED	В	en Ysursa etary of State		N	NO. 3		GENERAL C			OF ID.
			Box 83720			_				_	

BATELLE ENERGY ALLIANCE

PO Box 1625. Idaho Falls. ID 83415

LOBBYIST ANNUAL REPORT FORM

Page 2 of 2 Page(s)
THIS SPACE FOR OFFICE USE ONLY



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619)

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	ox 1703								12/31/0	9		(Mo.)	1	Day)	(Yr.)
Boise	, ID 8370	1										12		31	09
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	Date		Place			Aı	mount		Names of Legis	lators, Pi	iblic and	Execu	ive Of	ficials i	n Group
	ł														
	ontinued on a	attached page(s)											_		
		INST	RUCTIONS				Ite	em B	Em	nployer(s)	Name(s)	and A	ddress(es)	
Who	should file	this form: A	ny lobbyist reg	gistered u	nder Sectio	n	<u>~</u>	١	LEAR SPRIN						
67-6	617 Idaho C	ode						' P	O Box 712, B	uhl, Ida	aho 83	316	_		
Fili	ng deadline	: Annual repor	t is due on Jar bbist semi-an			2 Lot	N/s		ORRECTION						
			ooist scill-alli	iuai iepor	t due july 3	rot.	Ľ	<u> 1</u>	2647 Olive Bl	vd., St.	Louis,	MO 6	313	l	
TO	BE FILED V		en Ysursa				3		ORAL DENT						
		Secre	etary of State				_/,	1	2121 N. Corp	orate F	Prkway	Meq	uon,	WI 53	3092
			Box 83720 ID 83720-008	0			NQ		LI LILLY						
	Phor	ne: (208) 334-2			282		``ð	• 1	61 St. Anthon	v. Ste	820. St	Pau	I MN	5510	3

Rev. 06/2006



LOBBYIST ANNUAL REPORT FORM

To Be Filed By:

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LOBBYISTS (Sec. 67-6619)

Page 3 of 5 Page(s)
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	s Pertaining to I Not Have to b	obbying Activity e Reported	All Employers	Employer No.	9	Employer No./D	Employe	r No.//	Employe	er No 12
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	ontinued on a	attached page(s)			Item			() ()		
		INST	RUCTIONS		3	Em	ployer(s) Nam	ne(s) and Ac	dress(es)	
	o should file 617 Idaho C		ny lobbyist registered u	nder Section	1 NO L2	FMC Corporation 1101 Pennsylva		, Wash D	C 2000	4
Fili	ng deadline		t is due on January 31st bbist semi-annual repor			HOSPITAL CO One Park Plaza				
то	BE FILED V	В	en Ysursa etary of State		NO.	IDAHO SCHOOP.O. Box 9797				
	Phor	PO Boise,	Box 83720 ID 83720-0080 852 Fax: (208) 334-2:	282	No/1	INTERMOUNT P.O. Box 7608	AIN Ga	.5		

LOBBYIST ANNUAL REPORT FORM





State of Idaho

Ben Ysursa Secretary of State

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

To Be Filed By:

L-2 LOBBYISTS
(Sec. 67-6619)

✓	Annual	Semi-Annua

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered Patrick J. Sullivan year ending SULLIVAN & REBERGER 12/31/09 (Mo.) (Day) (Yr.) PO Box 1703 12 31 09 Boise, ID 83701 Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure *Total Amount for Item 3, at bottom of page.) Reimbursed Personal Living and Travel All Employers Expenses Pertaining to Lobbying Activity Employer No. 14 Employer No. 16 Do Not Have to be Reported Employer No Employer No. J. Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services 0.00 0.00 0.00 0.00 Total *When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1. The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials Item 2 Names of Legislators, Public and Executive Officials in Group Amount Continued on attached page(s) 1tem Employer(s) Name(s) and Address(es) INSTRUCTIONS MEDICAL TRANSPORTATION MANAGEMENT Who should file this form: Any lobbyist registered under Section 16 Hawk Ridge Dr., Lake St. Louis, MO 63367 67-6617 Idaho Code Filing deadline: Annual report is due on January 31st. MOTION PICTURE ASS'N of AMERICA Executive Lobbist semi-annual report due July 31st. 1600 Eye NW, Washington DC 20006 TO BE FILED WITH: Multi States Assoc, Inc for Comm. Finan. Srvcs Ben Ysursa Ass'n of Am., 515 King St., Alexandria VA 22314 Secretary of State PO Box 83720 PNGC (Pacific N'West Generating Cooperative) Boise, ID 83720-0080

711 NE Halsev, Portland, OR 97232

LOBBYIST ANNUAL REPORT FORM





State of Idaho

Ben Ysursa Secretary of State

To Be Filed	By:
L-2	LOBBYISTS (Sec. 67-6619)

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Lobbyist's name and p	permanent busine	ess address		Date	prepared		Period	covered
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		ole expenditures made or	incurred by Lobb	oviet or l	hy Lahhvist's Emple	wer on behalt		
Category of Ex Reimbursed Personal I Expenses Pertaining to	xpenditure Living and Travel	*Total Amount for All Employers		unts con	tributed by each emplo			· · · · · · · · · · · · · · · · · · ·
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Advertising Travel Telephone				_				
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The totals of Date		\$0.00 If are reporting for require ture of more than fifty do Place	ollars (\$50) for a l		filed a total amount	olic office, and	d executi	
		RUCTIONS		Item 3	Emp	ployer(s) Name	e(s) and A	ddress(es)
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TO BE FILED V	Be Secre	en Ysursa etary of State Box 83720		19,	TRANSCANAD 1400 SW 5th A	Α		
Phor	Boise,	EOX 83720 ED 83720-0080 852 Fax: (208) 334-22	282	20.	URS	g Ste 708.	Arlinata	on. VA 22202

Item 4	Expenditures personal proj	made by the lobb perty to any Legisla	yist or by the lobbyist's er tor, Public or Executive Of	mploye	r in the nature of contributions or for or on behalf of any Legislate	of mon	ey or other tangible or intangible lic or Executive Official.
	Date	Amount	Nan	ne of L	egislator, Public or Executive Offic	cial Rec	ceiving or Benefiting
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Itom	Identify an	y rule, ratemaking de	cision, procurement.		ERTIFICATION: I hereby certify the correct statement in accordance with S	at the all	57-6624 Iduho Code.
6	contract bid		icial services agreement or		abbyist signatule		Date
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					Appropriation Bil		farming, and livestock	• 1	and controlled substances, heal
(from t	lable)	Legislat	ive [dent]	Number	and Section N	umber	02 Amusements, games, athletics		insurance, hospitals
			:				and sports	18	Higher education
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:	:				1		investments	20	Insurance (excluding health
1:		:		:	: !	- 1 : 1	04 Children, minors, youth,		insurance)
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1 1	÷. [08 Education	25	Manufacturing, distribution an
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tem 6	contract bid	, ,	ecision, procurement, incial services agreement or opposing.	Lobbyist signature		Date
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Item 4	personal pr	operty to any Legi:	slator, Public or Executive O	mploy Micial	er in the nature of contributions or for or on behalf of any Legisla	of mot nor, Put	ney or other tangible or intangible olic or Executive Official.
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