State of Idaho

Ben Ysursa Secretary of State

LOBBYIST R	EPORT FORM
✓ ANNUAL	SEMI-ANNUAL

Page	of	_Pag	(\$)
THIS SPACE	E FOR OFFICE	USE	ONLY

To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619)

10 FEB -5 AM 7: 38

STATE OF IDAHO

	Še	e instructions at	t bottom of page										
Lobby st's name and permanent business address						Date prepared					Period covered		
Robert Vande Merwe											[year endi	.ng
Idaho Helath Care Association						0/0/40					(Mo.)	(Day)	(Yr.)
1524 W Cayuse Cr Meridian, ID 83646						2/2/10				12	31	2009	
Item					laure 7 al. laur	<u> </u>	1 T -1-	lauriast El			<u> </u>		
1	<u> </u>	•	ole expenditures made o				_		_				yer.
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		*Total Amount for All Employers		Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)							under		
			Employer No. 1		1 Employer No. 2		Employer No. 3		0.3	Employer No. 4			
Enterta	inment											-	
Food a	nd Refreshme	ent	s0.00_	. s		:	<u> </u>				[\$	
Living	Accommodat	ions	0.00			[-			.[
Advert	ising		0.00			.							
Travel			0.00			_ .			.				
Telepho	one		0.00						.				
Other I	Expenses or S	ervices	0.00										
						\rightarrow	-						
		Total	\$0,00	. s	0.00	<u> </u>	s	0.00	S	(0.00	s	0.00
The totals of each expenditure of more than seventy-five dollar member(s) of their household. 2 Date Place					Am	75) for	Names of Legislators, Public and Executive Opent and Household Members in Group					ecutive Offic	
—						O							
Continued on attached page(s)							<u> </u>	Employer(s) Name(s) and Address(es)					
INSTRUCTIONS						3		E	tibroles(2)	1491110(2	s) allu Au	101 522(63)	
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code					n	No. 1 Idaho Health Care Association 1524 W Cayuse Cr, Meridian, ID 83646							
Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st.					31st.	No. 2							
TO BE FILED WITH: Ben Ysursa					İ	No. 3							
Secretary of State												···	
	PO Box 83720 Boise, ID 83720-0080					No. 4							
ĺ	Phone: (208) 334-2852 Fax: (208) 334-2282												

Item 4 is no longer statutorily required.

		,		T*						
Item 5			ion, the number of the Senate legislative activity in which		LEGISLATIVE SUBJECT IDENTIFICATION					
3	the Lo	obbyist was supporting or op-	posing.	Code	Subject	Code	Subject			
	1		•	01	Agriculture, horticulture,	17	Health service, medicine, drugs			
Subject		Bill, Resolution or Other	Appropriation Bill Number	01	farming, and livestock	(/	and controlled substances, health			
(from	table)_	Legislative Ident, Number	and Section Number	02						
	_			02	Amusements, games, athletics		insurance, hospitals			
1	7	HB 146			and sports	18	Higher education			
1	7	HB 123		03	Banking, finance, credit and	19	Housing, construction, codes			
'	' I	110 120		١.	investments	20	Insurance (excluding health			
	- 1			04	Children, minors, youth,		insurance)			
				l	senior citizens	21	Labor, salaries and wages,			
				05	Church and religion		collective bargaining			
	ĺ			06	Consumer affairs	22	Law enforcement, courts,			
				07	Ecology, environment, pollution,		judges, crimes, prisons			
					conservation, zoning, land and	23	License, permits			
					water use	24	Liquor			
	- 1			08	Education	25	Manufacturing, distribution and			
		,		09	Elections, campaigns, voting,	-•	services			
				"	political parties	26	Natural resources, forest and			
				10	Equal rights, civil rights,		forest products, fisheries, mining			
				**	minority affairs		and mining products			
	ſ			11	Government, financing,	27	Public lands, parks, recreation			
	J			1.	taxation, revenue, budget,	28	Social insurance, unemployment			
						20				
				12	appropriations, bids, fees, funds		insurance, public assistance,			
	J			12	Government, county	20	workmen's compensation			
				13	Government, federal	29	Transportation, highways,			
				14	Government, municipal		streets and roads			
				15	Government, special districts	30	Utilities, communications,			
				16	Government, state		televisions, radio, newspaper,			
	[l			power, CATV, gas			
						31	Other (please specify)			
			,		ERTIFICATION: I hereby certify the orrect statement in accordance with S					
					1CAVN		- 22.b			
Item	Identify	any rule, ratemaking decision	on, procurement,	1.	oboyist signature		Date			
6	COULTSC	t bid or bid process, financial	l services agreement or							
	bond lo	obbyist was supporting or opp	oosing.]						
				l <u>-</u> -						
				Eπ	nployer No. 1 signature		Date			
				En	nployer No. 2 signature		Date			
				En	nployer No. 3 signature		Date			
				En	aployer No. 4 signature		Date			