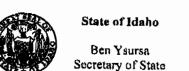
Rev. 05/2008

LOBBYIST MONTHLY REPORT FORM



To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

POSTED
Page___Of___Page(x)
THIS SPACE FOR OFFICH USE ONLY

09 MAR -6 PM 9: 04

SECRETARY OF STATE STATE OF IDAHO

	Sc	ype or print clea	bottom of pa	ik) ge										
Lobbyist's name and permanent business address								c prepared	· · · · ·		Period covered			
C. Tom Arkoosh - Capitol Law Group							1						h ending	
205 N. 10th Street, 4th Floor													,,	
Boise, ID 83702							3/3/09			(Me	o.) (Da	y) (Yr.)		
						9,0,00				•	0:	2 28	9 09	
Item 1 Totals of all reportable expenditures made or incurred by						hard 124-12	Shedet as her Labberton E. Co.							
1				ures made t			_						ployer.	
Reimbursed Personal Living and Travel *Total Amount for Item 3, at bottom							ounts contributed by each employer (Identify employers, under							
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			All Employers		Emple	Î		er No. 2	Employer No. 3 Employer No. 4					
Enterta						0.00								
Food and Refreshment			\$		s0.0		— [³	š	······································	. \$		\$		
Living Accommodations					·		I -							
Adverti	ising]	·	<u> </u>	0.00	_ _							
Travel			l	·		0.00) _				~			
Telepho	one				0.00)							
Other F	expenses or S	ervices	,		0.00		_ _				- /1			
-				·										
		Total	\$	0.00	s	0.00	5		0.00	s	0.00	\$	0.00	
Item-	Names of Legislators, Public and Executive Official									e officials				
	N/A													
(Continued on a	ttached page(s)												
	INSTRUCTIONS								En	Employer(s) Name(s) and Address(cs)				
	o should file 617 Idaho Co	this form: Ar	ny lobbyist re	egistered ur	der Section	n N	וחו		Water (Avenue		win Falls,	ID 8330	11	
		Monthly reposes of the past		hin fi <i>l</i> teen (15) dayя о	of the N	ი. 2							
тоз	BE FILED W													
Ben Yaursa Secretary of State							o. 3							
PO Box 83720 Boise, 1D 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282							o. 4							

I tem	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible perso property to any, for any or on behalf 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					
Item 4 Subject (from	N/A Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing. Et Code Bill, Resolution or Other rable) Legislative Ident. Number and Section Number					r Executive Official or Househol Public or Executive Official and Hou	BJECT Code 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	IDENTIFICATION Subject Health service, medicine, drugs and controlled substances, health insurance, hospituls 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 und services Nutural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmon's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)		
Item 6 Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.						Lohbyist signature	Section	57-6624 Idaho Code. 3 3 0 9 Date		