Rev. 05/2008

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

> Secretary of State PO Box 83720 Boise, ID 83720-0080

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

To Be Filed By:

LOBBYISTS (Sec. 67-6619)

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THIS SPACE	E FOR OFFIC	CE USE ONLY

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		ype or print clear ee instructions at							5	SECRE	TARY O	E STATE
Lobbyis		ermanent busine				Date pr	epared		·	Period c	overed I	AHO
Ph	illips 9	S. Baker,	Jr.			1				Б	month en	ding
		ing Compa					03/03/09				 r	Ū
			ive, Suite 200 83815-9408							(Mo.)	(Day)	(Yr.)
	Jeur u K	rene, in	03013 7400							02	28	09
Item 1	Total	s of all reportal	ble expenditures made o	r incurred b	y Lobbyi	ist or by	Lobbyist's Empl	oyer on l	ehalf of	f Lobby	ist's Emplo	yer.
Reimb		iving and Travel	*Total Amount for All Employers	Proportion Item 3, at			uted by each emplo	oyer (Ide	ntify emp	oloyers,	under	
	o Not Have to b	Lobbying Activity e Reported	All Employers	Employer No. 1		Employer No. 2		Employer No. 3		. 3	Employer No. 4	
Entertainment Food and Refreshment		ent	\$	\$		\$	s		\$		\$	
Living	Accommoda	tions										
Advert	ising											
Travel	8					_ _						
Teleph	one		12.00			_ -					,	
_	Expenses or S	Services	15.00									
					_	+				-		
		Total	s27.00	\$		_ s_		s			\$	
*When	the number of	employers you a	 are reporting for requires m	ultiple L-2 fo	orms to be	filed a tot	al amount for all e	mployers	should be	e entered	on Page 1.	
	The totals	of each expend	diture of more than seve									fficials and
Item-	member(s)	of their house	hold		_	_	Names of	f Legislato	rs, Public	and Ex	ecutive Office	ials
	Date		Place	Am		_		and House				
N	one											
	Continued on a	I attached page(s)										
		F B-(-)			1	Item		nployer(s)	Nama(e)	and Add	dross(as)	
ĺ		INST	RUCTIONS		-	3		————		and Au		
	o should file 6617 Idaho C		ny lobbyist registered un	ider Section	N	To. 1						
		Monthly repaires of the past	orts due within fifteen (15) days of	f the N	lo. 2						
то	BE FILED W				,,	. 2			_	_		
J		В	en Ysursa		N	o. 3						

No. 4

4	property to any, for any or on behalf of any Legislator, Pub					oyer in the nature of contributions of money or other tangible or intangible personablic or Executive Official or Household Member(s). Slator, Public or Executive Official and Household Member(s) Receiving or Benefiting				
Ŋ	one	ate	Amount	Name of Legis	nator, P	ublic of Executive Official and Hous	enoid Mi	ember(s) Receiving of Benefiting		
O7 08 11 18 20 26 27	or Ho the Lo	ousc Bill, obbyist was Bill, Re		ion, the number of the Senate legislative activity in which posing. Appropriation Bill Number and Section Number	Code 01 - 02 03 04 05 06 07 10 11 12 13 14 15 16	EGISLATIVE SUI Subject Agriculture, horticulture, farming, and livestock Amusements, garnes, 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, municipal Government, special districts Government, state		IDENTIFICATION Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salarics 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)		
1	tem dentify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.			CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code. 3-3.09						