Rev. 05/2008

## LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

| IST | MON. | IHLY | KLP | OKI | r Orti |
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|     |      |      |     |     |        |

To Be Filed By: LOBBYISTS (S∞. 67-6619)

| Page       | of         | Page(3)     |
|------------|------------|-------------|
| THIS SPACE | E FOR OFFI | CE USE ONLY |

| VE:  | 30                   | MCLERY VI SI                       | L  |                |  |  |                             | ויין צט                                     | ak 13            | 5 PM 4:        | 51           |  |
|--|----------------------|------------------------------------|--|----------------|--|--|-----------------------------|---|------------------|----------------|--------------|--|
|  | Œν                   | De or print clear!                 | y in black ink)                              |                |  |  |                             | SECNE                                       | TE O             | F IDAH         | TATE<br>In   |  |
| See instructions at bottom of page   |                      |                                    |  |                |  | 1Date r  | ate prepared Period covered |   |                  |                |              |  |
| Lobbyist's name and permanent business address   |                      |                                    |  |                |  | ,  | Auc prepared                |   |                  | month en       | ding         |  |
| Ed Lodge<br>Qwest Communications<br>999 Main 11th Floor<br>Boise,ID 83702                                    |                      |                                    |  |                |  | 03 13 0  | (Mo.) (Day) (Yr.) 02 28 09  |   |                  |                |              |  |
| Item   | Totals               | of all reportal                    | ole expenditures made or                     | r incurred by  | y Lobbyi   | ist or b   | y Lobbyist's Emple          | oyer on behalf o                            | f Lobby          | rist's Emplo   | yer          |  |
| Category of Expenditure  Reimbursed Personal Living and Travel  *Total Amount for                            |                      | *Total Amount for<br>All Employers | Proportionate amount<br>Item 3, at bottom of |                | unts contributed by each employer (Identify employers, under of page.) |  |                             |   |                  |                |              |  |
| Do   | Not Have to be       | Reported                           | 7 th Danpidy 415                             | Employer No. 1 |  | _  | Employer No. 2              | Employer No. 3                              |                  | Employer No. 4 |              |  |
| Enterrai<br>Food an  | nment<br>d Refreshme | mt                                 | \$1,101.42                                   | s              |  | _  \$_   |                             | s s   |                  | s              | <del></del>  |  |
| Living A   | Accommodat           | ions                               |  |                |  | _ -  |                             |   |                  |                |              |  |
| Adverti  | sing                 |                                    |  |                |  | _ -  | <del></del>                 |   |                  |                |              |  |
| Travel   |                      |                                    |  | ·              |  |  |                             |   |                  |                |              |  |
| Telcpho  |                      |                                    |  | l ——           |  |  |                             |   |                  |                |              |  |
| Other E  | expenses or S        | ervices                            |  |                |  | _ -  |                             |   |                  |                |              |  |
|  |                      | Total                              | s1,101.42                                    | s              | 0.00   | 0 s  | 0.00                        | s   | 0.00             | s              | 0.00         |  |
| •When  | the number of        | employers you a                    | re reporting for requires m                  | ultiple L-2 fo | orms to be   | filed a  | total amount for all e      | mployers should i                           | be entere        | d on Page 1.   |              |  |
|  |                      |                                    | diture of more than seve                     | enty-five do   | ilars (\$7   | 75) for  | a legislator, other l       | holder of public                            | office,          | executive of   | fficials and |  |
| Item-  | member(s)            | of their house                     |  |                | Names of   |  |                             | Legislators, Public and Executive Officials |                  |                |              |  |
|  | Date                 | .,                                 | Place  | Amı            |  | nount  |                             | and Household M                             | Members in Group |                |              |  |
|  |                      |                                    |  |                |  |  |                             |   |                  |                |              |  |
|  | Continued on :       | attached page(s)                   |  |                | <u> </u>   |  |                             |   |                  |                |              |  |
| INSTRUCTIONS   |                      |                                    |  |                |  | Item<br>3  | Er                          | Employer(s) Name(s) and Address(es)         |                  |                |              |  |
| Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code                          |                      |                                    |  |                |  | No. 1 Qwest Communications<br>999 Main 11th Floor, Boise, ID 83702 |                             |   |                  |                |              |  |
| Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month. |                      |                                    |  |                |  | No. 2  |                             |   |                  | •              |              |  |
| TO BE FILED WITH:  Ben Ysursa  Secretary of State  |                      |                                    |  |                |  | No. 3  |                             |   |                  |                |              |  |
| PO Box 83720   |                      |                                    |  |                | _ ,  | No. 4  |                             |   |                  |                |              |  |

| Item<br>4               | Exper                     | ditures            | made by the lobby   | or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal that of any Legislator, Public or Executive Official or Household Member(s). |  |   |   |   |  |
|-------------------------|---------------------------|--------------------|---|---|--|---|---|---|--|
|                         | Date Amount Name of Legis |                    |   | slator, Public or Executive Official and Household Member(s) Receiving or Benefiting  |  |   |   |   |  |
| Item 5 Subject (from 3) | Subject or Hou the Lo     | any role d process | Amount  Amount  Amount  Amount  Amount  Resolution or other as supporting or opperous or other ive Ident. Number  munications | Name of Legis  Name of Legis  ion, the number of the Senate legislative activity in which   | Codd-<br>01 02 03 04 05 06 07 10 11 12 13 14 15 16 | LEGISLATIVE SUI  E Subject Agriculture, horticulture, farming, and livestock Amusements, games, 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 Covernment, financing, uxation, revenue, budget, appropriations, bids, fees, funds | 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, hospitals 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 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) |  |
|                         |                           |                    |   |   |  | Lobbyist signature  |   | Date  |  |
|                         |                           |                    |   |   |  |   |   |   |  |