Rev. 05/2008

## LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

Page 1 of 2 Page(s)
THIS SPACE FOR OFFICE USE ONLY

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STATE OF IDAHO

			ly in black ink) bottom of page									
Lobbyist	's name and pen	menent busine	ss address				Date pro	pered		Period :	covered	
	C. Peterson	1									7 month	ending
	Box 829 I, ID 83701							03-13-0	9	(Ma.)	(Day)	(Yr.) 2009
Item 1	Totals o	of all reportal	ole expenditu	res made o				obbyist's Empl				
Reambi	itegory of Expensed Livi	ing and Travel	•Total Am			et pottem of br		ted by each emplo	yer ( <b>identify e</b> n	aployers	, under	
Expanses Pertaining to Lobbying Activity Do Not Have to be Reported		All Employers		Employer No. 1		Employer No. 2		Employer No. 3		Braployer No. 4		
Entertai Food an	inment id Refreshmen	t	s	0.00	s		s		s		\$	
Living Accommodations			0.00			.						
Advertising			0.00	THI	ERE WERE	NO	EXPENDITU	RES MADE	OR IN	CURRE	ON	
Travel			0.00	BE	HALF OF L	OBBY	IST'S EMPL	OYER BY L	OBBY	ST		
Telephone				0.00			.					
Other Expenses or Services		ļ	0.00			.						
	•	Total	5	0,00	s	0.00	5	0.00	\$	0.00	s	0.00
•When t	the number of en	nployers you a	re reporting for	requires m	' ultiple L-2	forms to be file	od a tota	l amount for all o	nployers should l	e entere	d on Page 1	
Item-		each expend	liture of more					gislator, other l				
2	1				Amou	Names of Legislators, Public and Executive Count and Household Members in Group					elsişlî	

## NO EXPENDITURES OVER \$75 REQUIRED TO BE REPORTED

Continued on authorized page(8)		<u> </u>			
INSTRUCTIONS  Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code		Employer(s) Name(s) and Address(cs)			
		No. 1 BHC Intermountain Hospital, Inc. 303 North Allumbaugh Street, Boise, ID 83704			
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 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282		Ng. 4			

liem 1	property to any, for any or on be		shalf of any Legislator, Pub	or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal alf of any Legislator, Public or Executive Official or Household Member(s).							
	Date	N/A	Name of Legislator, Public or Executive Official and Household Member(s) Receiving or Benefitting  NO EXPENDITURES MADE OR INCURRED PER ITEM 4								
, em	or House Bill, the Lobbyist v ode Bill, R ole) Logisla	Resolution or other least supporting or opposite	on, the number of the Senata egislative activity in which osing.  Appropriation Bill Number and Section Number	Code Subject  O1 Agriculture, hórticulture, farming, and livestock  O2 Amusemonts, games, athletics and sports  O3 Banking, finance, credit and investments  O4 Children, minors, youth, senior citizens  O5 Church and religion  O6 Consumer affairs  O7 Ecology, environment, pollution, conservation, zoning, land and water use  O8 Education  O9 Elections, campaigns, voting, political parties  I0 Equal rights, civil rights, minority affairs  I1 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds  I2 Government, county  I3 Government, federal  Government, financing of the county of the		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					
6 bic		ss, financial services o	, procurement, contract, or bond labbyist was support-	CERTIFICATION: 1 hereby certify obtrect statement in accordance with the conduction of the conduction of the conduction of the certific of the certific objects of the certific of the certifi	that the above is a true, complete and the section 67-6624 Idaho Code.  Date						