

State of Idaho

Ben Y sursa Secretary of State To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page 1 of Page(s)
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STATE OF IDAHO

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Lobbyist's name and permanent business address						Date prepared			Period covered			
Patrick J. Sullivan						) ,			month ending			
SULLIVAN & REBERGER						3/6/09	(M	o.) (Da	ıy) (Yr.)			
PO B	OX 1703				1 9/ 1/0 /				1 2	7109		
	E ID 8370	)1								01		
Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.												
man and the second of the seco			* Total Amount for		Item 3, at bottom of page.)		tributed by each employer ( <b>Identify e</b> .)			employers, under		
	Not Have to b		All Employers	Employer No	. 1	Employer No. 2		oyer No. 3	Employer No. 4			
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•	When the num	ber of employers	you are reporting for requi	 res multiple L-3 for	ms to be f	l iled a total amount for	all emplo	oyers should t	e entered o	n Page 1.		
Item			iture of more than fifty of			r or other holder of	public o	office.				
	Date		Place	A	Amount Names of Legislators & Public Officials					Group		
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		INST	Item Employer(s) Name(s) and Address(es)					)				
Who should file this form: Any lobbyist registered under Section						No.1 ADVANTAGE WORKER COMPENSATION						
67-6617 Idaho Code.						PO Box 571918, SLC, UT 84157						
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.						No.2 AREVA NC, INC. 4800 Hampden Ln, # 1100, Bethesda MD 20814						
•						ACCOCIATED CENEDAL CONTRACTORS						
TO BE FILED WITH:  Ben Ysursa  Secretary of State						No.3 ASSOCIATED GENERAL CONTRACTORS 1649 W. Shoreline Dr., Boise, ID 83702						
		PO Boise,	No.4 BATELLE ENERGY ALLIANCE									
Phone: (208) 334-2852 Fax: (208) 334-2282						PO Box 1625. ld. Falls. ID 83415						



State of Idaho

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LOBBYISTS (Sec. 67-6619) Page 2 of 5 Page(s)

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Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer									Employer.		
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity			* Total Amount for	-	roportionate amounts contributed by each employer (Identify employers, under tem 3, at bottom of page.)					ler	
	Not Have to b		All Employers	Employer N	Employer No 6 E			Employer No. 7 Employer No. §			
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Other I	Expenses or	Services					l		_1 _		
		Total	\$ 8	\$	0.00	\$	\$ 2	033	ĺ. s_	0.00	
**	When the num	ber of employers	you are reporting for requi	ires multiple L-3 fo	rms to be	e filed a total amount f	or all emp	oyers shoul	d be entere	d on Page 1.	
Item The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office.											
	Date		Ptace		mount	Names	of Legisla	tors & Publi	c Officials	in Group	
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INSTRUCTIONS						Item Employer(s)			Name(s) and Address(es)		
						CLEAD SDDING	EOOI	26			
	o s <mark>hould fik</mark> 6617 Idaho (		ny lobbyist registered u	nder Section	CLEAR SPRING FOODS PO Box 712, Buhl ID 83316						
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.						CORRECTIONAL MEDICAL SERVICES 12647 Olive Blvd., St. Louis, MO 63141					
						7 12047 Olive Bivd., St. Louis, IVIO 03141					
TO BE FILED WITH: Ben Ysursa						ELI LILLY CORPORATION 161 St. Anthony, Ste. 820, St. Paul MN 55103					
			etary of State Box 83720								
	The .	Boise,	ID 83720-0080		FMC Corporation 1101 Pennsylvania. #325. Washington DC 20004				DO 00004		
	Pno	ne: (208) 334-2	2852 Fax: (208) 334-2	ノ	TIUT Pennsylva	inia. #3	≥o. v <u>vas</u>	inaton	I DC 20004		



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L-3 LOBBYISTS (Sec. 67-6619)

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Lobbyist's name and permanent busin	s at bottom of page ess address		Da	ite prepared		Period covered		
Patrick J. Sullivan						month ending		
SULLIVAN & REBERGER		- 1	- 2 - 1					
PO BOX 1703	•		1	3/6/0	7	(Mo.) (Day) (Yr.)		
BOISE ID 83701			1 3/701			17. 128109		
Team	ble expenditures made or	incurred by Lob	byist o	by Lobbyist's Emplo	yer on behalf o	of Lobbyist's Employer.		
Category of Expenditure		Proportionate am	ounts co	ounts contributed by each employer (Identify employers, under				
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	* Total Amount for	Item 3, at botton	n of pag	ge.)				
Do Not Have to be Reported	All Employers	Employer No	5. <b>9</b> T	Employer No / ()	Employer N	No.// Employer No./17		
Entertainment Food and Refreshment	\$	\$330.89		sss		6 , 398.42		
Living Accommodations								
Advertising	9							
Travel	5							
Telephone								
Other Expenses or Services								
Total	\$0.00	s <u>330.</u> °	<u>89</u>	J0.00	\$C	0.00 \$ 398.42		
*When the number of employer						nould be entered on Page 1.		
			a legislator or other holder of public office.  Amount Names of Legislators & Public Officials in Group					
2 Date	Place	<del>-   ^</del>	mount	Names of	Legislators & P	ublic Officials in Group		
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INST	TRUCTIONS			Em	ployer(s) Name(s	(s) Name(s) and Address(es)		
			19	HOSPITAL COR	PORATION	of AMERICA		
Who should file this form: A 67-6617 Idaho Code.	ny lobbyist registered u	inder Section	One Park Plaza, Nashville, TN 37203					
Filing deadline: Monthly re	• •	) days of the	/ ₱: INTERMOUNTAIN GAS COMPANY					
month for activities of the pas	t month.		┡ -	PO Box 7608, Bo	oise, iu 83/	101		
TO BE FILED WITH:	V		17,	MOTION PICTU	RE ASS'N o	of AMERICA		
	Ben Y sursa retary of State		Ľ	1600 Eye NW, W	/ashington [	OC 20006		
PC	Box 83720		[,,]	Multi States Ass	ociates Inc	for Community		
	ID 83720-0080 2852 Fax: (208) 334-2	282		for Community  America. 515 King				
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Patrick J. Sullivan			- [			<b>∠</b>	month endi	ing	
SULLIVAN & REBERGER			27/1	C	(Ma)	(Day)	(V=)		
PO BOX 1703			3/6/09			(Mo.)	(Day)	(Yr.)	
BOISE ID 83701						6	1 28	09	
Item 1 Totals of all reportab	le expenditures made or	incurred by Lo	bbyist o	r by Lobbyist's Emplo	yer on behalf o	of Lobbyi	ist's Employ	er.	
Category of Expenditure Reimbursed Personal Living and Travel	* Total Amount for		oportionate amounts contributed by each employer (Identify employers, under em 3, at bottom of page.)						
Expenses Pertaining to Lobbying Activity  Do Not Have to be Reported	All Employers	Employer N		Employer No. 14	Employer N		Employe	r No di	
		Employer No.		(1)	Lampioyer	ployer No 13 Employ		10/6	
Entertainment Food and Refreshment	\$	\$		\$5663	\$	2	\$		
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Other Expenses or Services	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			12					
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Total	\$0.00	\$	<u></u>	\$	\$	0.00	\$	0.00	
*When the number of employers						ould be en	ntered on Page	e I.	
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INST	RUCTIONS		3	I Em	Employer(s) Name(s) and Address(es)				
			1121	PNGC (Pacific N	West Gene	rating C	Cooperativ	/e)	
Who should file this form: An 67-6617 Idaho Code.	ny lobbyist registered u	711 NE Halsey, Portland, OR 97232							
		أديرا	DECIMED ENED	CV HOLDIN	ICS (al	ka SIE\			
Filing deadline: Monthly rep month for activities of the past		REFINED ENERGY HOLDINGS (aka SIE) 116 Radio Circle - Suite 209, Mt. Kisco, NY 10549							
TO BE FILED WITH:		15 THOMSON MEDSTAT							
	en Ysursa etary of State	75) 777 E. Eisenhower, Ann Arbor, MI 48108							
	Box 83720	1,5	Tanaca	<del>`</del>					
	ID 83720-0080	າຄາ	116)	TransCanada	onuo #000	Dodlos	4 OB 03	7204	
Fnone: (208) 334-	2852 Fax: (208) 334-2			1400 SW 5th Av	enue #900.	roman	u. UK 9/	201	



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L-3 LOBBYISTS (Sec. 67-6619)

Page 5 9 Page(s)
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(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered month ending Patrick J. Sullivan SULLIVAN & REBERGER (Day) PO BOX 1703 **BOISE ID 83701** Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure Reimbursed Personal Living and Travel \* Total Amount for Item 3, at bottom of page.) Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. Employer No. / Employer No. Employer No. Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services 0.00 0.00 0.00 0.00 Total \*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be entered on Page 1. The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office. Item Names of Legislators & Public Officials in Group Place Amount Continued on attached page(s) Employer(s) Name(s) and Address(es) INSTRUCTIONS URS (fka Washington Group Int'l) Who should file this form: Any lobbyist registered under Section 2345 Crystal Drive, Ste 708, Arlington VA 22202 67-6617 Idaho Code. d IDAHO SCHOOL BOARDS ASS'N Filing deadline: Monthly reports due within ten (10) days of the P.O. Box 9797, Boise, ID 83707-9797 month for activities of the past month. TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282

ltem 4				byist or by the lobbyist's e lator, or for or on behalf of	employer in the nature of contributions of money or other tangible or intangible fany legislator.						
	Date		Amount	tion, the number of the Senate		Name of Legislator Receiving or Benefited		ENTIFICATION			
(from	or He the L	ouse Bill, obbyist w Bill, Re Legislat	Resolution or other supporting or or or other ive Ident. Number	r legislative activity in which	Code 01 02 03 04 05 06 07 10 11 12 13 14 15 16	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		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)			
	statemen	nt in acco	rdance with Section	5/10/0 a	] ?						