LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3

LOBBYISTS (Sec. 67-6619)

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

09 MAR -3 AM 4: 35

SECREMAN UF STATE STATE OF IDAHO

		e instructions at												
Lobbvist's name and permanent business address								Date prepared				Period covered		
Robert Vande Merwe 802 W Bannock, suite 304 Boise, ID 83702							3/2/09				(Mo	_	th ending	
									5/2/00	,	2	28	в 200	
Item 1	Total	s of all reportal	ble expend	litures made o	r incurred	by Lobbyis	st or l	by Lobby	ist's Emp	loyer on be	half of Lob	yist's En	iployer.	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			*Total Amount for All Employers		Proportionate amount Item 3, at bottom of Employer No. 1					tify employers, under				
Entertainment			\$	0.00	\$	0.00	\$			s		\$		
Food and Refreshment			5	0.00	. 5	0.00			_	- •		J.—		
Living Accommodations Advertising				0.00		0.00	- -		_					
Travel	6			0.00		0.00	_ -		_					
Telephone				0.00		0.00	- -							
Other Expenses or Services				0.00		0.00								
		Total	\$	0.00	s	0.00	s		0.00	s	0.00	\$	0.00	
						_	_							
*When	The totals	of each expend	diture of r				_							
Item- 2	member(s) of their household. Date Place			Amo		Names of Legislators, Public and Executive Officials nt and Household Members in Group								
	-										-			
	Continued on	attached page(s)												
Continued on attached page(s) INSTRUCTIONS						<u> </u>	Item 3 Employer(s) Name(s) and Address(es)							
								 Idaho H	ealth C	are Asso	ciation			
	o should file 6617 Idaho C	this form: Andode	ny lobbyis	t registered un	der Section	n N	Λ I)4, Boise I	d 8370	2	
		Monthly reposes of the past		vithin fisteen (15) days o	of the No	o. 2							
TO	BE FILED W	VITH:					_						_	
Ben Ysursa Secretary of State PO Box 83720							0. 3							
Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282							o. 4							

Item 4	property to any for any or an habelf of any Legislator, Public or Executive Official or Household Member(s)										
	Date		Amount	Name of Legis	lator, Public or Executive Official and Household Member(s) Receiving or Benefiting						
Item 5				ion, the number of the Senate legislative activity in which		LEGISLATIVE SUI	ВЈЕСТ	IDENTIFICATION			
3	the Lo	bbyist w	as supporting or opp	posing.	1	e Subject		Subject			
(from	17 Legislat		HB 123 HB146	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 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 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	17 18 19 20 21 22 23 24 25 26 27 28 29 30	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)			
Item 6		d process		on, procurement, contract, or bond lobby ist was support-		CERTIFICATION: I hereby certify correct statement in accordance with Lobbyist signature	that the a	above is a true, complete and 67-6624 Idaho Code. Date			