Rev. 05/2008

LOBBYIST MONTHLY REPORT FORM

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State of Idaho

Ben Ysursa Secretary of State

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L-3	LOBBYISTS (Sec. 67-6619)	0	FEB	13	PM	1:	12	
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(Type or print clearly in black ink) See instructions at bottom of page Date prepared Period covered Lobbyist's name and permanent business address month ending Potlatch Corporation 801 W. First Avenue, Suite 1600 (Day) (Yr.) (Mo.) Spokane, WA 99201 2/13/09 31 09 1

Category of Expenditure Reimbursed Personal Living and Tra		Proportionate amounts contributed by cach employer (Identify employers, under Item 3, at bottom of page.)						
Expenses Permining to Lobbying Acti Do Not Have to be Reported	All employers	Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4			
Entertainment Food and Refreshment	\$	\$	\$	S	\$			
Living Accommodations	200.26							
Advertising								
Travel	255.10							
Telephone								
Other Expenses or Services				[
Tota	s455.36	\$0.00	s. 0.00	\$0.00	s0.00			

*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1.

The totals of each expenditure of more than sevenry-five dollars (\$75) for a legislator, other holder of public office, executive officials and member(s) of their household.

| Date | Place | Amount | Names of Legislators, Public and Executive Officials and Household Members in Group

Continued on attached page(s)

itero 3 Employer(s) Name(s) and Address(es) INSTRUCTIONS Potlatch Corporation Who should file this form: Any hobbyist registered under Section 601 W. First Ave., Suite 1600, Spokane, WA 99201 67-6617 Idaho Code Filing deadline: Monthly reports due within fifteen (15) days of the No. 2 month for activities of the past month. TO BE FILED WITH: No. 3 Ben Ysursa Secretary of State PO Box 83720 Boise, 1D 83720-0080 No. 4 Phone: (208) 334-2852 Fax: (208) 334-2282

Item 4				by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal of any Legislator, Public or Executive Official or Household Member(s).						
	Date	Amount	Name of Legis	Name of Legislator, Public or Executive Official and Household Member(s) Receiving or Benefiting						
Item 5 Subject (from	or House E the Lobbyi		on, the number of the Senate legislative activity in which losing. Appropriation Bill Number and Section Number	Code 01 02 03 04 05 06 07 10 11 12 13 14 15 16	LEGISLATIVE SUI 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 Blections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, federal Government, municipal Government, special districts Government, state		IDENTIFICATION Subject Health service, medicine, drugs and controlled substances, health insurence, hospitals Higher education Housing, construction, codes maurance (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		ocess, financial services	n, procentement, contract, or bond lobbyist was support-		CERTIFICATION: I hereby certify correct statement in accordance with Lohbyist signature	that the si	bove is a true, complete and 67-6624 Idaho Code. 2/13/09 Date			