DDVICT MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

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To Be Filed By:

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LOBBYISTS (Sec. 67-6619) Page of Pagc(s) THIS SPACE FOR OFFICE USE ONLY

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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 Robert 6 Taunton month ending 1596 S. Lakemoor Way Eagle 10 83616 (Mo.) (Day) (Yr.) Man 2009 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 *Total Amount for Item 3, at bottom of page.) Reimbursed Personal Living and Travel All Employers Expenses Pertaining to Lobbying Activity Employer No. 1 Employer No. 4 Do Not Have to be Reported Employer No. 2 Employer No. 3 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services 0.00 0.00 Total \$ *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 seventy-five dollars (\$75) for a legislator, other holder of public office, executive officials and member(s) of their household. Item Names of Legislators, Public and Executive Officials 2 Date Place Amount and Household Members in Group Continued on attached page(s) Item Employer(s) Name(s) and Address(es) INSTRUCTIONS Elmore-Ada Water Project, LLC 300 E. Mallard Dr., Ste 350 Who should file this form: Any lobbyist registered under Section BOISE 10 83706 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, ID 83720-0080 No. 4

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer property to any, for any or on behalf of any Legislator, Pub				loyer in the nature of contributions of money or other tangible or intangible personal blic or Executive Official or Household Member(s).				
	Ε	Date	Amount	Name of Legi	Name of Legislator, Public or Executive Official and Household Member(s) Receiving or Benefiting				
Item 5 Subject (from t	or Ho the L	ouse Bill, lobbyist was Bill, Re		ion, the number of the Scnate legislative activity in which posing. Appropriation Bill Number and Section Number	Code 01 02 03 04 05 06 07 10 11 12 13 14 15 16	LEGISLATIVE SUP 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 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, municipal Government, special districts Government, state		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)	
Item 6 Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.				CERTIFICATION: I hereby certify to correct statement in accordance with	Section 6				
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