LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State ODDITIST MONTHLY REPORT FO

To Be Filed By:

L-3

LOBBYISTS (Sec. 67-6619)

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

09 JUN -5 AM 9: 22

STATE OF IDAHO

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address

Karianne Fallow

1365 West Kongi Court

	f all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.										
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)									
Do Not Have to be Reported		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4						
Entertainment Food and Refreshment	\$0.00	s0.00	s	\$	\$						
Living Accommodations	0.00	0.00									
Advertising	0.00	0.00									
Travel	0.00	0.00									
Telephone	0.00	0.00									
Other Expenses or Services	0.00	0.00									
Total	s0.00	s0.00	s0.00	s0.00	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.

Continued on attached page(s)

Item Employer(s) Name(s) and Address(es) INSTRUCTIONS Wal-Mart Stores, Inc. No. 1 702 SW 8th Street, MS 0350 Who should file this form: Any lobbyist registered under Section Bentonville, Arkansas 72716-0130 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 Phone: (208) 334-2852 Fax: (208) 334-2282

tem 4	prop	erty to ar	ny, for any or on b	ehalf of any Legislator, Pul	by the lobbyist's employer in the nature of contributions of money or other tangible or intangible persona of any Legislator, Public or Executive Official or Household Member(s). Name of Legislator, Public or Executive Official and Household Member(s) Receiving or Benefiting				
	N/A	et matter.	Amount		lator, P				
or House the Lobb		ouse Bill, obbyist wa Bill, Re	r of proposed legislation, the number of the Senate, Resolution or other legislative activity in which was supporting or opposing. Resolution or Other ative Ident. Number and Section Number		Code 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	farming, and livestock O2 Amusements, 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 10 Equal rights, civil rights, minority affairs 11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds 12 Government, county 13 Government, federal 14 Government, municipal 15 Government, special districts		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)	
	bid or t			n, procurement, contract, or bond lobbyist was support-		CERTIFICATION: I hereby certify correct statement in accordance with Karianne Fallow:			