

LOBBYIST ANNUAL REPORT FORM

THIS SPACE FOR OFFICE USE ONLY



State of Idaho

Ben Yursa
Secretary of State

To Be Filed By:
L-2 LOBBYISTS
(Sec. 67-6619)

2003 DEC 3 AM 8:28
STATE

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

Lobbyist's name and permanent business address Randy Nelson PO Box 1665 Boise, ID 83701	Date prepared 12/31/03	Period covered <input checked="" type="checkbox"/> year ending (Mo.) (Day) (Yr.) 12 31 03
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Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	Total Expenditure	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4
Entertainment	\$ 0.00	\$	\$	\$	\$
Food and Refreshment	\$ 0.00	\$	\$	\$	\$
Living Accommodations	\$ 0.00	\$	\$	\$	\$
Advertising	\$ 0.00	\$	\$	\$	\$
Travel	\$ 0.00	\$	\$	\$	\$
Telephone	\$ 0.00	\$	\$	\$	\$
Office Expenses	\$ 0.00	\$	\$	\$	\$
Other Expenses or Services	\$ 0.00	\$	\$	\$	\$
Total	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Item 2	The totals of each expenditure of more than fifty dollars (\$50) for a legislator or other holder of public office.			
Date	Place	Amount	Names of Legislators & Public Officials in Group	

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Continued on attached page(s)

<p align="center">INSTRUCTIONS</p> <p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: Annual report is due on January 31st.</p> <p>TO BE FILED WITH:</p> <p align="center">Ben Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	Item 3	Employer(s) Name(s) and Address(es)
	No. 1	Associated Taxpayers of Idaho PO Box 1665, Boise, ID 83701
	No. 2	
	No. 3	
	No. 4	

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.		
	Date	Amount	Name of Legislator Receiving or Benefited

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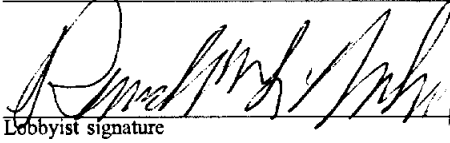
Item 5 Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.

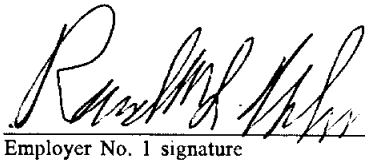
Subject Code (from table)	Bill, Resolution or Other Legislative Ident. Number	Appropriation Bill Number and Section Number

LEGISLATIVE SUBJECT IDENTIFICATION

- | | |
|---|--|
| <ul style="list-style-type: none"> 01 Agriculture, horticulture, farming, and livestock 02 Amusements, games, athletics and sports 03 Banking, finance, credit and investments 04 Children, minors, youth, senior citizens 05 Church and religion 06 Consumer affairs 07 Ecology, environment, pollution, conservation, zoning, land and water use 08 Education 09 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 16 Government, state | <ul style="list-style-type: none"> 17 Health service, medicine, drugs and controlled substances, health insurance, hospitals 18 Higher education 19 Housing, construction, codes 20 Insurance (excluding health insurance) 21 Labor, salaries and wages, collective bargaining 22 Law enforcement, courts, judges, crimes, prisons 23 License, permits 24 Liquor 25 Manufacturing, distribution and services 26 Natural resources, forest and forest products, fisheries, mining and mining products 27 Public lands, parks, recreation 28 Social insurance, unemployment insurance, public assistance, workmen's compensation 29 Transportation, highways, streets and roads 30 Utilities, communications, televisions, radio, newspaper, power, CATV, gas 31 Other (please specify) _____ |
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CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.

 12-31-03
 Lobbyist signature Date

 12-31-03
 Employer No. 1 signature Date

 Employer No. 2 signature Date

 Employer No. 3 signature Date

 Employer No. 4 signature Date