



State of Idaho
Ben Ysursa
Secretary of State

LOBBYIST ANNUAL REPORT FORM

To Be Filed By:

L-2 LOBBYISTS
(Sec. 67-6619)

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

05 JAN 10 PM 1:22
LEGISLATIVE STATE OF IDAHO

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

Lobbyist's name and permanent business address PAUL JACKSON 7150 POTOMAC BOISE, IDAHO 83704	Date prepared 1-9-05	Period covered <input type="checkbox"/> year ending (Mo.) (Day) (Yr.) 12 31 04
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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 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	\$ <u>80</u>	\$ <u>80</u>	\$ _____	\$ _____	\$ _____
Food and Refreshment	_____	_____	_____	_____	_____
Living Accommodations	_____	_____	_____	_____	_____
Advertising	_____	_____	_____	_____	_____
Travel	_____	_____	_____	_____	_____
Telephone	_____	_____	_____	_____	_____
Other Expenses or Services	\$ <u>131</u>	\$ <u>131</u>	_____	_____	_____
Total	\$ <u>211</u>	\$ <u>211</u>	\$ _____	\$ _____	\$ _____

*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.

Item 2	Date	Place	Amount	Names of Legislators & Public Officials in Group
None				

POSTED

Continued on attached page(s)


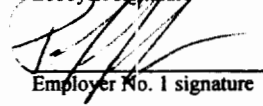
<p align="center">INSTRUCTIONS</p> <p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.</p> <p>Filing deadline: Annual report is due on January 31st.</p> <p>TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	Item 3	Employer(s) Name(s) and Address(es)
	No.1	FARMERS INSURANCE 7150 POTOMAC BOISE, ID. 83704
	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
	NONE		

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
	SEE ATTACHED		

LEGISLATIVE SUBJECT IDENTIFICATION

- | | |
|--|---|
| 01 Agriculture, horticulture, farming, and livestock | 17 Health service, medicine, drugs and controlled substances, health insurance, hospitals |
| 02 Amusements, games, athletics and sports | 18 Higher education |
| 03 Banking, finance, credit and investments | 19 Housing, construction, codes |
| 04 Children, minors, youth, senior citizens | 20 Insurance (excluding health insurance) |
| 05 Church and religion | 21 Labor, salaries and wages, collective bargaining |
| 06 Consumer affairs | 22 Law enforcement, courts, judges, crimes, prisons |
| 07 Ecology, environment, pollution, conservation, zoning, land and water use | 23 License, permits |
| 08 Education | 24 Liquor |
| 09 Elections, campaigns, voting, political parties | 25 Manufacturing, distribution and services |
| 10 Equal rights, civil rights, minority affairs | 26 Natural resources, forest and forest products, fisheries, mining and mining products |
| 11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds | 27 Public lands, parks, recreation |
| 12 Government, county | 28 Social insurance, unemployment insurance, public assistance, workmen's compensation |
| 13 Government, federal | 29 Transportation, highways, streets and roads |
| 14 Government, municipal | 30 Utilities, communications, televisions, radio, newspaper, power, CATV, gas |
| 15 Government, special districts | 31 Other (please specify) _____ |
| 16 Government, state | |


 Lobbyist signature _____ Date 1-9-05

 Employer No. 1 signature _____ Date 1-10-05
 Employer No. 2 signature _____ Date _____
 Employer No. 3 signature _____ Date _____
 Employer No. 4 signature _____ Date _____

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.

SUBJECT CODE	BILL NO.	SUBJECT CODE	BILL NO.
20	487	31	671
	488	28	673
	489	28	674
	490	11	724
	491	06	1220
	492	31	1227
	493	31	1228
	494	20	1236
	495	22	1243
	496	06	1283
	497	22	1332
	499	22	1369
	501	09	1375
512	19	1391	
22	513	22	1420
28	533	31	1440
06	535	16	SJM 106
28	545		
06	555		
06	557		
20	567		
11	569		
20	620		
20	621		
22	640		
	643		
	649		