

LOBBYIST ANNUAL REPORT FORM



State of Idaho
Ben Yursa
Secretary of State

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

2005 JAN -6 10:05:52

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

Lobbyist's name and permanent business address VICKI SMITH IDAHO VETERINARY MEDICAL ASSN. 3416 W 4th ST. KUNA, ID 83634	Date prepared 1-5-05	Period covered <input type="checkbox"/> year ending (Mo.) (Day) (Yr.) 12 31 04
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Item 1	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.				
Category of Expenditure <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	* 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>0</u>	\$ _____	\$ _____	\$ _____	\$ _____
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Advertising	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Travel	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Telephone	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other Expenses or Services	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Total	\$ <u>0</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	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	
NA				

Continued on attached page(s)

INSTRUCTIONS	Item 3
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.	Employer(s) Name(s) and Address(es)
Filing deadline: Annual report is due on January 31st.	No.1 Vicki Smith
TO BE FILED WITH: Ben Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	No.2 IDAHO VETERINARY MEDICAL ASSN.
	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
			NA

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.			LEGISLATIVE SUBJECT IDENTIFICATION	
	Subject Code (from table)	Bill, Resolution or Other Legislative Ident. Number	Appropriation Bill Number and Section Number	Code	Subject
		NA		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
				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) _____

Vicki Smith 1-5-05
 Lobbyist signature Date

 Employer No. 1 signature Date

 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.