

LOBBYIST MONTHLY REPORT FORM



State of Idaho
Ben Yarns
Secretary of State

To be filed by:
L-3 LOBBYISTS
(Sec. 67-6619)

SECRETARY OF STATE
STATE OF IDAHO

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

Lobbyist name and permanent business address STEVE BECKHAM LIBERTY NORTHWEST INSURANCE CORPORATION P. O. BOX 4666 PORTLAND, OREGON 97208-4666	Date prepared 5/4/2005	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr) 4 6 2005
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Category of Expenditure (Relationship Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported)	Total Amount for All Employees	Expenses amount contributed by each employer (Individually employees under Item 3, at bottom of page)			
		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4
Supplemental Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Advertising	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Travel	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Telephone	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Other Expenses or Services	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Total	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

*When the number of employees is less than 10, the total amount for all employees should be entered on Page 1.

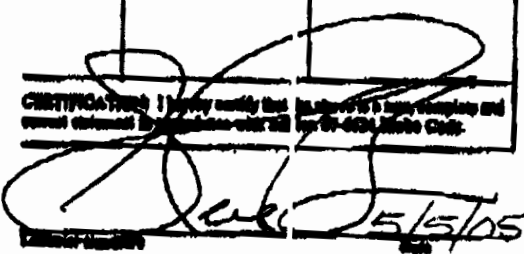
Item	Date	From	Amount	Name of Lobbyist & Public Official in Charge

INSTRUCTIONS Who should file this form: All lobbyists registered under Section 67-6617 (Idaho Code). Filing deadline: Monthly reports are due within ten (10) days of the month for activities of the past month. TO BE FILED WITH: Ben Yarns Secretary of State P.O. Box 83720 Boise, ID 83720-0880 Phone: (208) 334-2323 FAX: (208) 334-2320	Step 3 Employer(s) Name(s) and Address(es) No.1 LIBERTY NORTHWEST INS., P.O. BOX 4666 PORTLAND, OR 97208-4666 No.2 No.3 No.4
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POSTED

Item #	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, Legislator or Legislator

Item #	Subject matter of proposed legislation or House bill, resolution or other legislative activity in which the lobbyist was supporting or opposing.	Appropriation Bill Number and Section Number	LEGISLATIVE SUBJECT IDENTIFICATION
20	HB 41		01 Agriculture, horticulture, fishing, and livestock
20	HB 48		02 Amusement, games, athletic and sports
20	HB 52		03 Banking, finance, credit and investments
20	HB 53		04 Children, women, youth, senior citizens
20	HB 54		05 Church and religion
20	HB 59		06 Consumer affairs
20	HB 102		07 Housing, environment, pollution, conservation, parks, land and water use
20	HB 111 thru		08 Education
20	HB 120		09 Elections, campaigns, voting, political parties
20	HB 141		10 Equal rights, civil rights, minority groups
20	HB 180		11 Government, financing, taxation, revenue, budget, appropriations, state, local, federal
20	HB 231		12 Government, security
20	SB 1027		13 Government, federal
20	SB 1030		14 Government, municipal
20	SB 1041		15 Government, special districts
20	SB 1058		16 Government, state
20	SB 1059		17 Health services, medical, drugs and controlled substances, health insurance, hospitals
20	SB 1063		18 Higher education
20	SB 1067		19 Housing, construction, code
20	SB 1082		20 Insurance (excluding health insurance)
20	SB 1083		21 Labor, unions and wages, collective bargaining
20	SB 1087		22 Law enforcement, courts, judges, clerks, prisons
20	SB 1092		23 Liquor, alcoholic
20	SB 1093		24 Liquor
20	SB 1168		25 Manufacturing, distribution and services
			26 Mental resources, foster and adult programs, education, training and training programs
			27 Public health, parks, recreation
			28 Public insurance, unemployment insurance, public retirement, workers' compensation
			29 Transportation, highways, roads and roads
			30 Utilities, communication, telephones, mail, newspaper, press, CATV, etc.
			31 Other (please specify)



 CERTIFICATION: I hereby certify that the information furnished on this form is true and complete and that I am a duly licensed lobbyist in the State of Oregon.