LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page of Page(s)
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05 MAR 10 PM 4: 04

SECRETARY OF STATE

		(Type or print cl See instructions	•											
Lobbyist		ermanent busine		- F-8-			D	ate pre	pared	<u></u>	 	Period	covered	
Molly	Steckel												month	ending
601 West Bannock						3/9/05								
Boise, ID 83702											(Mo.)	(Day 28	1	
														03
Item 1	Totals	of all reportab	łe expendit	ures made or	r incurred	by Lobb	yist o	r by L	obbyist's Empl	oyer on	behalf of	Lobb	yist's Em	ployer.
	tegory of Ex		* Total A	Amount for		onate amo			uted by each emp	loyer (Id	entify em	ployer	s, under	
Expenses		bbying Activity	All Employers	Employer No. 1			1 Employer No. 2		Employer No. 3			Employer No. 4		
Enterta Food a	inment nd Refreshm	ent	\$		\$	114.	50	\$	0.00	\$	0	.00	\$	0.00
Living	Accommoda	ations												
Advert	ising													
Travel					l									
Telepho	one						_	_						
Other I	Expenses or	Services								l	·			
		Total	\$	0.00	\$	114.	50	\$_	0.00	\$	0.	.00	\$	0.00
**									a total amount fo			uld be	entered or	Page 1.
Item 2	Date	of each expend	Plac		dollars (3		nount		or other holder o		office. ators & Pu	blic Of	ficials in (Group
	Duit					 		_						
	Continued on	attached page(s)									rc.	01]	
		INST	RUCTIO	NS			Ite 3	m [Er	nployer(s	s) Name(s)	and A	ddress(es)	
	o should file	e this form: A			under Se	ction	No.1	Dev 589	elopers of H 2 W. Hidden	idden Sprin	Springs gs Drive	s, Inc e, Bo	ise, ID	83714
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.					No.2 Anderson Financial Services LLC P.O. Box 68987, Milwaukie, OR 97268									
то	BE FILED	E	Ben Ysursa	ate			No.3 Anheuser-Busch Companies, Inc. One Busch Place, St. Louis, MO 63118-1852							1852
	Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282						No.4							

Item	personal property to any Legislator, or for or on behalf of any legislator.										
	Date	Amount		Name of Legislator Receiving or Benefited							
ltem			s, the number of the Senate	LEGISLATIVE SUB	JECT I	IDENTIFICATION					
5	the Lobbyist	was supporting or oppo	sing.	Code Subject		Subject					
Subject (from ta	able) Legisla	Resolution or Other Aive Ident. Number 021 (Emp 1)	ppropriation Bill Number and Section Number	O1 Agriculture, horticulture, 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 O1 Equal rights, civil rights, minority affairs O1 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds O1 Government, rederal O1 Government, municipal O1 Government, special districts O1 Government, state	18 19 20 21 22 23 24 25 26	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)					
			pove is a true, complete and								
	t signature	Stell	Date	05							

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

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SECRETARY OF STATE STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page	
d permanent business address	 Date pro

Lobbyist's name and permanent business address					Da	te pn	epared	Period covered					
Molly	Steckel					1					month en	ding	
•	Vest Bann	ock						3/9/05		(Mo.)			
Boise, ID 83702								3,0,00			1	(Yr.)	
										2	28	05	
Item 1	Totals	of all reportab	le expenditures made or	incurred b	y Lobb	yist or	by 1	Lobbyist's Emplo	oyer on behalf	of Lobby	yist's Emplo	уег.	
	egory of Ex d Personal Livi		* Total Amount for	Proportion Item 3, at				outed by each emp	loyer (Identify e	mployer	s, under		
Expenses I		bbying Activity	All Employers		yer No.		_	nployer No. 2	Employer N	Vo. 3	Employ	er No. 4	
Enterta			s	\$	0.0	_	\$	114.50		0.00	\$	76.44	
Living	Accommoda	ations				İ							
Adverti	sing												
Travel						_	_						
Telepho	one						_		l				
Other I	Expenses or	Services				_	_						
		Total	\$0.00	\$	0.0	00	\$_	114.50	\$	0.00	\$	76.44	
*1	When the num	ber of employers	I you are reporting for requ	l ires multiple	L-3 for	ns to b	e file	d a total amount fo	r all employers s	hould be	entered on Pa	ge l.	
Item 2		of each expend	iture of more than fifty	dollars (\$50			itor		f public office. of Legislators & 1	Dublia Of	Sciola in Gra	· · · · · · · · · · · · · · · · · · ·	
	Date		Place		All	nount		14dilles	or Legislators &	uone Or	netars in Gro	·P	
								PO	STED				
	Continued on	attached page(s)			ł								
		INST	TRUCTIONS			Ite:		Er	nployer(s) Name	(s) and A	ddress(es)		
	o should file		ny lobbyist registered	under Secti	ion	No.1	Ida 30	ho Medical A 5 W. Jefferso	ssociation n, Boise, ID	83702	2		
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.					the	No.2 Idaho Telephone Association P.O. Box 88, Cambridge, ID 83610-0088							
TO BE FILED WITH: Ben Ysursa Sacretary of State						No.3 Idaho Psychological Association P.O. Box 352, Boise, ID 83701-0352							
	Secretary of State PO Box 83720 Boise, ID 83720-0080						No.4 ACEC-Idaho						
	Phone: (208) 334-2852 Fax: (208) 334-2282						P.O. Box 8224. Boise. ID 83707						

tem perso	nal property to any Legis	lator, or for or on behalf of	iny le	er in the nature of contributions of gislator.	or mon	cy or other mingrote or mangro
D	ate Amount			Name of Legislator Receiving	or Bene	fited
or Ho		tion, the number of the Senate r legislative activity in which pposing.	Code	LEGISLATIVE SUE		IDENTIFICATION Subject
Subject Code	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs
(from table)	Legislative Ident, Number			farming, and livestock		and controlled substances, health
4.7	05 4405 (5 4)		02	Amusements, games, athletics and sports	18	insurance, hospitals Higher education
17	SB 1105 (Emp 1)		03	Banking, finance, credit and	19	Housing, construction, codes
17	SB 1119 (Emp 1)			investments	20	Insurance (excluding health
17	SB 1140 (Emp 1)		04	Children, minors, youth,	21	insurance)
17	SB 1158 (Emp 1)		05	senior citizens Church and religion	21	Labor, salaries and wages, collective bargaining
17	SB 1163 (Emp 1)		06	Consumer affairs	22	Law enforcement, courts,
	' ' '		07	Ecology, environment, pollution,		judges, crimes, prisons
30	HB 224 (Emp 2)			conservation, zoning, land and	23	License, permits
16	HB 143 (Emp 4)		08	water use Education	24 25	Liquor Manufacturing, distribution and
23	HB 163 (Emp 4)		09	Elections, campaigns, voting,	23	services
11	HB 263 (Emp 4)		10 11 12 13 14 15 16	political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds	26 27 28 29 30 31	
	ION: I hereby certify that the	e above is a true, complete and				