LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State





LOBBYISTS (Sec. 67-6619)

 $\begin{array}{c} Page \quad \quad of \quad \underline{\quad \quad Page(s)} \\ \text{THIS SPACE FOR OFFICE USE ONLY} \end{array}$

06 DEC 28 PM 1: 06

STATE OF IDAHO

(Type or print clear See instructions at	•						01 10
Lobbyist's name and permanent business. KEN MILLER 5400 W Franklin BOISE ID 8370	address			prepared U. 9 1, 2000	0	Period covered Mouth pear ending	
BOISE ID 8370	os (208) 8	90.3941	4			(Mo.)	(Day) (Yr.)
Item 1 Totals of all reportable of	expenditures made or	incurred by Lob	byist or b	y Lobbyist's Emple	oyer on behal	f of Lobby	vist's Employer.
Expenses Pertaining to Lobbying Activity	* Total Amount for All Employers	Item 3, at botton	n of page.) .	oyer (Identify employers, under		
Do Not Have to be Reported Entertainment		Employer No). 1	Employer No. 2	Employer	No. 3	Employer No. 4
Food and Refreshment \$	0	\$	\$		\$		\$
Living Accommodations	0		-				
Advertising	0		.				
Travel	0		_				
Telephone	0						
Other Expenses or Services	0						
Total \$		\$	\$		\$		\$
*When the number of employers yo							entered on Page 1.
The totals of each expenditure Date	re of more than fifty of Place		legislato				icials in Group
Continued on attached page(s)							
INSTRU	Item 3	En	iployer(s) Nam	ver(s) Name(s) and Address(es)			
Who should file this form: Any 67-6617 Idaho Code.	No.1	NW Energy Coalition					
Filing deadline: Annual report	is due on January 31	st.	No.2				
Secreta PO Bo	Ysursa ry of State ox 83720		No.3				
Boise, ID Phone: (208) 334-28	282	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.								
		Ľ	Date	Amo	unt			Name of Legislator Receiving	or Bene	fited
0	Stubject (from 17, 17	or He the L Code table)	Duse Bill, Robbyist w Bill, Robyist w H O H O H O S 12 5 13 5 13	Resolution or Vas supporting esolution or Or Or ive Ident. Nur	other legislator opposing. her Appropriate and Id C	number of the Senate rive activity in which priation Bill Number Section Number	01 02 03 04 05 06 07 08 09 10 11	Government, municipal Government, special districts Government, state Lobbyist signature Employer No. 1 signature Employer No. 2 signature	Code 17 18 19 20 21 22 23 24 25 26 27 28 29 30	Subject 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) Date Date
	CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.							Employer No. 3 signature		Date