Rev. 06/2006

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

Tα	Re	Filed	By:		

3 LOBBYISTS (Sec. 67-6619)

Page	of	Page(s)
THIS SPACE	CE FOR OFFIC	E USE ONLY

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ECHETARY OF STATE STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page Period covered Lobbyist's name and permanent business address Date prepared Albert P. Barker month ending PO BOX 2139 (Day) 4/3/07 (Mo.) (Yr.) Boi'se 10 83701-2139 03 31 2007 Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure *Total Amount for Item 3, at bottom of page.) Reimbursed Personal Living and Travel All Employers Expenses Pertaining to Lobbying Activity Employer No. 4 Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services -0-Total \$ *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. The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials. 2 Names of Legislators, Public and Executive Officials in Group Date Place Amount Continued on attached page(s) Item Employer(s) Name(s) and Address(es) INSTRUCTIONS Project Board of Control No. 1 Who should file this form: Any lobbyist registered under Section 2465 Overland Rd 67-6617 Idaho Code D 83705 Filing deadline: Monthly reports due within ten (10) days of the No. 2 month for activities of the past month. TO BE FILED WITH: No. 3 Bcn Ysursa Sccretary of State PO Box 83720 Boise, ID 83720-0080 No. 4

tem 4	Expenditures made by the lobbyist or by the lobbyist's en personal property to any Legislator, Public or Executive Of		fficial	or for or on behalf of any Legisla	tor, Pub	olic or Executive Official.	
	Date Amount Nam			ne of L	egislator, Public or Executive Off	cial Re	ceiving or Benefiting
tem 5	,, , , , ,		on, the number of the Senate legislative activity in which	LEGISLATIVE SUBJECT IDENTIFICATIOn Code Subject O1 Agriculture, horticulture, farming, and livestock and controlled subsect insurance, hospitals and sports 18 Higher education			
				03 04 05 06 07 08 09 10 11 12 13 14 15 16	Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	19 20 21 22 23 24 25 26 27 28 29 30	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, unemploymen insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)
tem 6	bid or bid	y rule, ratemaking dee process, financial service or opposing.	ision, procurement, contract es or bond lobbyist was	-	CERTIFICATION: I hereby certificorrect statement in accordance with the control of the control of the certific correct statement in accordance with the certific correct statement in accordance wit		