P.02

Rev. 06/2006

## LOBBYIST MONTHLY REPORT FORM

To Be Filed By:

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State of Idaho

Ben Ysursa Secretary of State

LOBBYISTS L-3 (Sec. 67-6619)

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See instructions at bottom of page Lobbyist's name and permanent business address							Date prepared			Period covered		
Blue Cross of Idaho Health Service, Inc.										month ending		
P.O. Box 7408							3/5/08	3	(Mo.)	(Day)	(Yr.)	
Boise, ID 83707-7408									2	29	08	
Item 1	Totals	of all reportat	le expenditures made o	r incurred b	y Lobb	yist or	by Lobbyist's Emp	loyer on behalf	of Lobby	ist's Emplo	у <b>ег</b> .	
	regory of Ex	penditure		Proportion	ate amoi	mis con	tributed by each emp	loyer (Identify	employers,	under		
		iving and Travel	*Total Amount for All Employers	Item 3, at bottom o			.)	<del></del>				
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			7th Employer	Employer No. 1		t L	Employer No. 2	Employer l	Employer No. 3		Employer No. 4	
Enterta Food ar	inment nd Refreshme	ent	\$73.75	\$	73.7	<u>'5</u>		s		s		
Living	Accommodat	ions				_						
Adverti												
Travel	-											
Telepho	one											
	xpenses or S	ervices				_				-		
		Total	s <u>73.75</u>	s	73,7	_   •		\$		5	0.00	
*When			are reporting for require								on Page 1.	
2	Date	each expendi	Place	111812 (320)		nount		lators. Public an			in Group	
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<u> </u>	no beunitno.	attached page(s)				14	<del></del>					
INSTRUCTIONS						Item 3	Et	Employer(s) Name(s) and Address(es)				
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						No. 1 Blue Cross of Idaho Health Service, Inc.						
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.						No. 2 3000 E. Pine Avenue Meridian, ID 83642						
TO BE FILED WITH:									<u> </u>			
Ben Ysursa												
Secretary of State PO Box 83720							<del></del> -					
Boise, ID 83720-0080						No. 4						
	Phou	e: (208) 334-2	852 Fax: (208) 334-22	282								

Item 4	Expenditures made by the lob personal property to any Legisl		made by the lobb perty to any Legisl	yist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible tor. Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.						
·	Date		Amount	Nan	Name of Legislator, Public or Executive Official Receiving or Benefiting					
- 1	Subjet or Hothe Le	et matter use Bill, obbyist w	of proposed legislati Resolution or other	on, the number of the Senate legislative activity in which	fficial one of L	LEGISLATIVE SUR  Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports 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	SJECT Code	IDENTIFICATION  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		
Item Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.						CERTIFICATION: I hereby certification: I hereby certification: I hereby certification of the conference of the conference of the conference of the certification of the certifica				