

**LOBBYIST MONTHLY REPORT FORM**



**State of Idaho**  
  
Ben Yursa  
Secretary of State

To Be Filed By:  
  
**L-3** LOBBYISTS  
(Sec. 67-6619)

08 MAR -4 AM 8:15

SECRETARY OF STATE  
STATE OF IDAHO

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

Lobbyist's name and permanent business address  <b>DAVID E. KERRICK</b> P.O. BOX 44 CALDWELL, ID 83605	Date prepared  <p style="text-align: center;"><b>MARCH 3, 2008</b></p>	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) <p style="text-align: center;">02   29   2008</p>
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Item 1	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.				
Category of Expenditure <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4
Entertainment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations	_____	_____	_____	_____	_____
Advertising	_____	_____	_____	_____	_____
Travel	_____	_____	_____	_____	_____
Telephone	_____	_____	_____	_____	_____
Other Expenses or Services	_____	_____	_____	_____	_____
<b>Total</b>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>

\*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.

Item 2	The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials.			
Date	Place	Amount	Names of Legislators, Public and Executive Officials in Group	

Continued on attached page(s)

<p style="text-align: center;"><b>INSTRUCTIONS</b></p> <p><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code</p> <p><b>Filing deadline:</b> Monthly reports due within ten (10) days of the month for activities of the past month.</p> <p><b>TO BE FILED WITH:</b>                  Ben Yursa                  Secretary of State                  PO Box 83720                  Boise, ID 83720-0080                  Phone: (208) 334-2852 Fax: (208) 334-2282</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%; text-align: center;">Item 3</th> <th style="text-align: center;">Employer(s) Name(s) and Address(es)</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">No. 1</td> <td>ASSOCIATED INNKEEPERS OF IDAHO 10200 W. EMERALD, BOISE, ID 83704</td> </tr> <tr> <td style="text-align: center;">No. 2</td> <td>NEZ PERCE TRIBE P.O. BOX 305, LAPWAI, ID 83540</td> </tr> <tr> <td style="text-align: center;">No. 3</td> <td>THOMSON-WEST 610 OPPERMAN DR., ST. PAUL, MN 55123</td> </tr> <tr> <td style="text-align: center;">No. 4</td> <td> </td> </tr> </tbody> </table>	Item 3	Employer(s) Name(s) and Address(es)	No. 1	ASSOCIATED INNKEEPERS OF IDAHO 10200 W. EMERALD, BOISE, ID 83704	No. 2	NEZ PERCE TRIBE P.O. BOX 305, LAPWAI, ID 83540	No. 3	THOMSON-WEST 610 OPPERMAN DR., ST. PAUL, MN 55123	No. 4	
Item 3	Employer(s) Name(s) and Address(es)										
No. 1	ASSOCIATED INNKEEPERS OF IDAHO 10200 W. EMERALD, BOISE, ID 83704										
No. 2	NEZ PERCE TRIBE P.O. BOX 305, LAPWAI, ID 83540										
No. 3	THOMSON-WEST 610 OPPERMAN DR., ST. PAUL, MN 55123										
No. 4											

<b>Item 4</b>	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, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.		
	Date	Amount	Name of Legislator, Public or Executive Official Receiving or Benefiting

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**Item 5** Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.

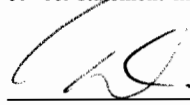
Subject Code (from table)	Bill, Resolution or Other Legislative Ident. Number	Appropriation Bill Number and Section Number

**LEGISLATIVE SUBJECT IDENTIFICATION**

- |  |   |
|--|---|
| <b>Code Subject</b>  | <b>Code Subject</b>   |
| 01 Agriculture, horticulture, farming, and livestock                                   | 17 Health service, medicine, drugs and controlled substances, health insurance, hospitals |
| 02 Amusements, games, athletics and sports   | 18 Higher education   |
| 03 Banking, finance, credit and investments  | 19 Housing, construction, codes   |
| 04 Children, minors, youth, senior citizens  | 20 Insurance (excluding health insurance)   |
| 05 Church and religion   | 21 Labor, salaries and wages, collective bargaining                                       |
| 06 Consumer affairs  | 22 Law enforcement, courts, judges, crimes, prisons                                       |
| 07 Ecology, environment, pollution, conservation, zoning, land and water use           | 23 License, permits   |
| 08 Education   | 24 Liquor   |
| 09 Elections, campaigns, voting, political parties                                     | 25 Manufacturing, distribution and services   |
| 10 Equal rights, civil rights, minority affairs  | 26 Natural resources, forest and forest products, fisheries, mining and mining products   |
| 11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds | 27 Public lands, parks, recreation  |
| 12 Government, county  | 28 Social insurance, unemployment insurance, public assistance, workmen's compensation    |
| 13 Government, federal   | 29 Transportation, highways, streets and roads  |
| 14 Government, municipal   | 30 Utilities, communications, televisions, radio, newspaper, power, CATV, gas             |
| 15 Government, special districts   | 31 Other (please specify) _____   |
| 16 Government, state   |   |

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.

**Item 6** Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.

  
 \_\_\_\_\_  
 Lobbyist signature

3/3/08  
 \_\_\_\_\_  
 Date