

LOBBYIST MONTHLY REPORT FORM

POSTED



State of Idaho
Ben Ysursa
Secretary of State

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

09 MAR 10 AM 8:04

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 <i>Morgan W. Richards Jr. 204 East Pennsylvania Lane Boise, Idaho 83706</i>	Date prepared <i>Awarded 3/7/09</i>	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr) <i>3 31 08</i>
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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 Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*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	\$ <i>Ø</i>	\$ <i>Ø</i>	\$ _____	\$ _____	\$ _____
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations	_____	_____	_____	_____	_____
Advertising	_____	_____	_____	_____	_____
Travel	_____	_____	_____	_____	_____
Telephone	_____	_____	_____	_____	_____
Other Expenses or Services	_____	_____	_____	_____	_____
Total	\$ <i>Ø</i>	\$ <i>Ø</i>	\$ _____	\$ _____	\$ _____

*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 seventy-five dollars (\$75) for a legislator, other holder of public office, executive officials and member(s) of their household.			
Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group	
	<i>Ø</i>			

Continued on attached page(s)

<p align="center">INSTRUCTIONS</p> <p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.</p> <p>TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	Item 3	Employer(s) Name(s) and Address(es)
	No. 1	<i>Alternate Energy Holdings, Inc 911 E. Winding Creek Drive #150 Eagle, Idaho 83616</i>
	No. 2	
	No. 3	
	No. 4	

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Living Accommodations	_____	_____	_____	_____	_____
Advertising	_____	_____	_____	_____	_____
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	No. 1	<i>Blue Cross of Idaho P.O. Box 7408 Boise, Idaho 83707</i>
	No. 2	<i>Intermountain Hospital 303 Alexander Boise, Idaho 83704</i>
	No. 3	<i>W. Hovatta Dental 6750 N.E. Campus Way Hillsboro, Oregon 97124</i>
	No. 4	

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	No. 1	<i>Writers Corp Exchange P.O. Box 359 Lewiston, Idaho 83501</i>
	No. 2	<i>Associated Loggers Exchange P.O. Box 16410 Boise, Idaho 83715</i>
	No. 3	
	No. 4	