FORRAISE MONTHER KELOKY LOKM



State of Idaho

Ben Ysursa Secretary of State

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

To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

P. 02/03
THIS SPACE FOR OFFICE USE ONLY

09 MAY 14 AM 9: 43

SECRETATE OF STATE

(Type or print clearly in black ink) See instructions at bottom of page									STATE OF IDAHO			
Lobbyis		permanent busine	_ ,		1	Date prepared				Period covered		
ervence A. Curky											month ending	
MARCH OF DIMES 3222 W. OVERLAND RD. BOISE, ID 83705							5.14	7	(Mo.) (Day) (Yr.) 4 30 09			
Item 1	Total		ole expenditures made or	r incurred by L	obbyist	or by	Lobbyist's Empl	oyer on l	behalf of	Lobby	yist's Employer.	
C		openditure Living and Travel Lobbying Activity	*Total Amount for All Employers		ate amounts contrib bottom of page.)		outed by each employer (Ide				s, under	
Do Not Have to be Reported				Employer No. 1		Employer No. 2		Employer No.		3	Employer No. 4	
	inment nd Refreshm	ent	\$	_		\$_		\$			\$	
Living	Accommoda	anoit	l ———	•		_] —				
Advert	ising		l — / —			_		—				
Travel			l ——							—		
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Other I	Expenses or S	Services			—			******				
		Total	\$	s		s_		s		_	\$	
-When Item			u are reporting for require ture of more than fifty do									
2	Date		Place		Amoun						ve Officials in Group	
<u>, </u>	Continued on	attached page(s)										
						em 3	Employer(s) Name(s) and Address(es)					
	INSTRUCTIONS							,	, .			
	Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						No. 1					
Fili: mon	Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.						No. 2					
TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720						No. 3						
Boise, ID 83720-0080							No. 4					

Item	Expenditures personal prop		made by the lob erty to any Legis	lator, Public or Executive Of	y the lobbyist's employer in the nature of contributions of money or other tangible or intangible ic 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						
	ftean 5 Subject ror House the Lobbubject Code E			ion, the number of the Senate legislative activity in which posing. Appropriation Bill Number and Section Number	01	LEGISLATIVE SUI Subject Agriculture, horticulture, farming, and livestock	Subject Health service, medicine, drugs and controlled substances, health				
17			B 185		02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	taxation, revenue, budget, appropriations, bids, fees, funds	18 19 20 21 22 23 24 25 26 27 28 29 30	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)			
Item Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.						Lobbyist signature	141 4				