LOBBYIST MONTHLY REPORT FORM

M	Page	of	Page(s)			
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State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619)

	clearly in black ink) ns at bottom of page		SÉU S	NETARY OF S TATE OF IDAI	STATE HO
Lobbyist's name and permanent		<u> </u>	Date prepared	Per	iod covered
KICH GARBE	R		Dute propued		month ending
SZI W STA	TE 57				Mo.) (Day) (Yr.)
BOISE ID	83702				1 31 09
Item 1 Totals of all rep	ortable expenditures made o	or incurred by Lobi	byist or by Lobbyist's Emp	oloyer on behalf of L	obbyist's Employer.
Category of Expenditure Reimbursed Personal Living and Tr Expenses Pertaining to Lobbying Ac	avel *Total Amount for	Proportionate amo	ounts contributed by each employers of page.)	ployer (Identify emplo	oyers, under
Do Not Have to be Reported	uvky 7111 Employers	Employer No.	l Employer No. 2	Employer No. 3	Employer No. 4
Entertainment Food and Refreshment	\$. \$	\$	\$	\$
Living Accommodations		.	_		
Advertising		.			
Travel					_
Telephone	50	.			
Other Expenses or Services	50				
	1000				
Tot	1 20 5	s	s	s	s
*When the number of employe	rs you are reporting for requir	res multiple L-3 for	ms to be filed a total amou	nt for all employers sh	hould be entered on Page 1.
Item The totals of each exp	penditure of more than fifty d		egislator, other holder of p	ublic office, and exec	cutive officials.
2 Date	Place	A	mount Names of Legi	islators, Public and Ex	ecutive Officials in Group
Continued on attached pa	age(s)	I			
			Item F	imployer(s) Name(s) an	d Address(es)
]	NSTRUCTIONS		1/27	- (5/0E(VE	JAGRICULI UK
Who should file this form	n: Any lobbyist registered u	ınder Section	No. 1 Mascon) ID 8.	3044
Filing deadline: Month month for activities of the	ly reports due within ten (past month.	10) days of the	No. 2	:	
TO BE FILED WITH:					
	Ben Ysursa		No. 3		
	Secretary of State PO Box 83720				
•	oise, ID 83720-0080 334-2852 Fax: (208) 334-2	2282	No. 4		

Item 4			s made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible perty to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.					
	D	ate	Amount	Nar	Name of Legislator, Public or Executive Official Receiving or Benefiting			
Item				on, the number of the Senate legislative activity in which		LEGISLATIVE SUF	ВЈЕСТ	IDENTIFICATION
5	1		as supporting or op	-	Code	Subject	Code	Subject
Subject (from	t Code	Bill, Re		Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	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	17 18 19 20 21 22 23 24 25 26 27 28 29 30	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 Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)
	bid or		ss, financial service	ision, procurement, contract es or bond lobbyist was		CERTIFICATION: I hereby certificorrect statement in accordance of the control of		