Rev. 05/2008

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619)

Page___of__Page(s)
THIS SPACE FOR OPPICE USE ONLY

09 FEB 17 AM 9: 15

CRETARY OF STATE STATE OF IDAHO

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Lobbyisi		manent busine		Date prepa	red		Period	covered				
Dan/h	Holiar							[month cr	nding		
8169	W. Victory	Rd.						0.5-	(Darr)	(V-)		
Boise	, ID 83709					2/16/09			(Mo.)	1	(Yr.) I	
									1	31	09	
(tem			ble expenditures made o								yer.	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity			*Total Amount for All Employers	Item 3, at bottom of								
De	Not Have to be	Reported		Employer No. 1		Employer No. 2		Employer No. 3		Employer No. 4		
Entertai Food an	nment d Refreshme	nt	\$	\$. s		\$		\$		
Living A	Accommodati	ons				.		<u> </u>				
Adverti	sing					.						
Travel						.						
Telepho	nc					.					*******	
Other E	хропвоз от Ѕе	ervices										
			0.00		0.00	 	0.00		0.00	_	0.00	
		Total	5	S	0.00	· \$	0.00	\$		S	0.00	
Item-	the number of employers you are reporting for requires multiple L-2 forms to be filed a total smount The totals of each expenditure of more than seventy-five dollars (\$75) for a legislator, member(s) of their household. Date Place Amount						islator, other l					
48 00				,								
[**]	Continued on a	ttached page(s)										
INSTRUCTIONS						tem 3	En	Employer(s) Namo(s) and Address(cs)				
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						No. 1 Boise School District 8169 W. Victory Rd., Boise, ID 83709						
Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.					the No.	No. 2						
TO BE FILED WITH:												
Ben Ysursa Secretary of State						No. 3						
PO Box 83720												
Boise, TD 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282						No. 4						

Item 4	property to any, for any or on behalf of any Legislator, Public or Executive Official or Household Member(s).										
	Date		Amount	Name of Legis	Name of Legislator, Public or Executive Official and Household Member(s) Receiving or Benefiting						
		_				NONE					
Subject (from the subject of the sub	or House the Lobb Code E table) L	Bill, I byist we Bill, Re egislati oforr Bois	Resolution or other lass supporting or opp	on, the number of the Senate legislative activity in which osing. Appropriation Bill Number and Section Number the viewpoint District on Education.	Codd 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15	Government, federal		IDENTIFICATION Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Lahor, 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 6	114 - 114					CERTIFICATION: I hereby certify correct statement in accordance with Lobbyist signature	that the above is a true, complete and a Section 67-6624 Idalio Code. 2/14/27 Date				