## LOBBYIST MONTHLY REPORT FORM



## State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page 1 of 4 Page(s)
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STATE OF IDAHO

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	's name and permanent busin	icss address	SCAM	Paic	prepared		Perind co	overed	
	iel J. Kane	- 400					] month cad	jing .	
1087 W. River Street, Suite 100 Boise, Idaho 83702						(Day)	(Yr.)		
00100	, 100110 00102				February 5,	2009	(Mo.)	31	09
Item 1	Totals of all report	able expenditures made o	r incurred by Lob	byist or l	y Lobbyist's Empl	oyer on beh	alf of Lobby	st's Employ	yer.
Reimbj	tegory of Expenditure rised Parsonal Living and Travel Pertaining to Lobbying Activity		Proportionate amo Item 3, at bottom		ributed by each emplo	yer (Identil	y employers,	under	
Do	Not Have to be Reported	, , ,	Employer No.	1	Employer No. 2	Employer No. 3		Employer No. 4	
Entertai Food an	nment d Refreshment	s 74.588337	s58.79		0,00	\$	0.00	\$	15.79
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Other E	xpenses or Services	164				-			sudnite
	Total	s 74.58 83.37	s 58	.79 s	0.00	\$	0.00	\$	15.79
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*When t		are reporting for requires menditure of more than seve			^ ···				fficials and
Item-	member(s) of their hous			477-7					
2	Date	Place		Amount			Public and Extended Members in		ials
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T)	  Continued on attached page	n)							
	prigor(			Item	<u> </u>			3	
	INS	STRUCTIONS		3					
	o should file this form:	Any lobbyist registered ut	nder Section	NO 1	Idaho Sheriffs A 700 W. Washin			3702	
					ICRMP				
inon	ith for activities of the pas	eports due within fifteen ( st manth.	No. 2	No. 2 P. O. Box 15249, Boise, ID 83716					
то	BE FILED WITH:	D. 11		Idaho Board of	Prof. Eng	ineers/Lar	nd Survey	rors	
		Bon Ysursa crotary of State	No. 3	5535 W. Overla	-		-	<b>-</b>	
		O Box 83720 c. ID 83720-0080	No. 1 Property Consulty Inc.					mories	
		-2852 Fax: (208) 334-2	NO. 4	No. 4 Property Casualty Insurers Association of America 2600 S. River Road, Des Plaines, IL 60018					

Item 4	Expenditures made by the lobbyist or by the lobbyist's emplo property to any, for any or on behalf of any Legislator, Pub				loyer in the nature of contributions of money or other tangible or intangible personal blic or Executive Official or Household Member(s).						
	Da	te Amount	Name of Legislator, Public or Executive Official and Flouschold Member(s) Receiving or Be								
Item 5 Subject (from t	Subjector Flow the Lot Code (able)	I matter of proposed legisla se Bill, Resolution or other obyist was supporting or o Bill, Resolution or Other Legislative Ident, Number	trion, the number of the Senate or legislative activity in which possing,  Appropriation Bill Number and Section Number		LEGISLATIVE SUB- Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics	Code	IDENTIFICATION  Subject  Health service, medicine, drugs and controlled substances, health insurance, hospitals				
<b>タ</b> ク		RS 18 495		Amusements, games, athletics and spirits 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 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, tederal Government, special districts Government, state	18 19 20 21 22 23 24 25 26 27 28 29 30	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 (Itilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)					
Item 6		id process, financial service	sion, procurement, contract, es or bond lobbyist was support		CERTIFICATION: I hereby certify: correct statement in accordance with  Mucheel Kan  Lobbyist signature	Section					

PAGE 04/05

## LOBBYIST MONTHLY REPORT FORM



NEV. 113144110

State of Idaho

Bon Ysursa Secretary of State To Be Filed By:

LOBBYISTS **L-3** (Sec. 67-6619) Page 3 of 4 Page(s) THIS SPACE FOR OFFICE USE ONLY

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obbyist's name and permanent business address						ate prop	te prepared				Period coveted		
Michael J. Kane										[7	month ending		
1087 W. River Street, Suite 100 Boise, Idaho 83702					February 5, 2009				(Mo.) (Day) (Yr.) 1 31 09				
Item 1	Totals of	of all reportat	ole expenditures made o	r incurred by Lo	bb <u>vist</u>	or by L	obbyist's Emp	loyer on b	ehalf of	Lobby	ist's Employer,		
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity  All Employers			Proportionate an Item 3, at batto			ed by cach empi	oyer (Idei	ntify emp	loyers.	under			
	Not Have to be			Employer No	<u> 5.5                                   </u>	Employer No		Employer No		Employer No.			
			s (totals	s	.00	\$ 	71121	\$	1780 a		\$		
Fravel Felepho	-	rvices	page 1)							i			
<u> </u>		Total	s	5	0.00	s		s		:	s		
When t	The totals of		re reporting for requires m diture of more than seve hold.				gislator, other	holder of	public o	office, e	executive offici	als and	
2	Date	Place		Λmc				nes of Legislators, Public and Executive Officials and Household Members in Group					
	Continued on att	hehed page(s)					<u></u>						
INSTRUCTIONS						em 3	E	mployer(s)	Name(s)	and Ad	dress(cs)		
67-6 Filin	617 Idaho Co	de Monthly repe	ny lobbyist registered un orts due within fifteen ( month.		No.		ociation of I				ors		
TO BE FILED WITH:  Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282													
	r.ueve.	(400) 334-2	o⊋∠rax; (208) 334-2										

Item 4	Expenditures made by the lobbyist or by the lobbyist's employ property to any, for any or on behalf of any Legislator, Publ										
	Date		Amount	Name of Legis	Name of Legislator, Public or Executive Official and Household Member(s) Receiving or Benefiting						
Item 5	nr Ho the Lo	use Bill, obbyist w	Resolution or other as supporting or opp	on, the number of the Senate legislative activity in which osing.  Appropriation Bill Number	Code 01	LEGISLATIVE SUB	Code	Subject Health service, medicine, drugs			
(from	iable)	Logislat	ive Ident. Number	and Section Number	02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	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 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, minicipal Government, special districts Government, state	18 19 20 21 22 23 24 25 26 27 28 29 30	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)			
Item 6	vid or bi	id proces prosing.		n, procurement, contract, or hond lobbyist was support-	·	CERTIFICATION: I hereby certify to correct statement in accordance with Muchuel Conference Lobbyist signature	Section				