## LOBBYIST MONTHLY REPORT FORM PR - 6 AM 9: 41



## State of Idaho

Ben Ysursa Secretary of State

> Secretary of State PO Box 83720 Boise, 1D 83720-0080

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

To Be Filed By:

**L-3** 

**LOBBYISTS** (Sec. 67-6619) SECRETALM 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 Date prepared Period covered month ending Blake G. Hall P.O. Box 51630 4/1/2009 (Day) (Mo.) (Yr.) Idaho Falls, ID 83405-1630 3 31 2009 ltem Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure \*Total Amount for Item 3, at bottom of page.) Reimbursed Personal Living and Travel All Employers Expenses Pertaining to Lobbying Activity Employer No. 4 Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services 0.00 0.00 0.00 0.00 0.00 Total \*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. The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials. Names of Legislators, Public and Executive Officials in Group 2 Place Amount Date Continued on attached page(s) Item Employer(s) Name(s) and Address(es) INSTRUCTIONS No. 1 CH2M WG IDAHO, LLP Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Monthly reports due within ten (10) days of the No. 2 151 North Ridge Avenue, Ste. 15 month for activities of the past month. Idaho Falls, ID 83401 TO BE FILED WITH: No. 3 Ben Ysursa

No 4

Item 4	personal property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official							
	N/A	ite	Amount	Nai	ne of I	egislator, Public or Executive Off	icial Rec	ceiving or Benefiting
Item 5 Subject (from N/	or Hou the Lol Code table)	ise Bill, l bbyist w Bill, Re	Resolution or other as supporting or op	ion, the number of the Senate legislative activity in which sposing.  Appropriation Bill Number and Section Number	Code 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	LEGISLATIVE SUB  Subject 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 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, tederal Government, special districts Government, special districts Government, state	Code 17 18 19 20 21	Subject 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, worknien's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)
	bid or bi	fy any rule, ratemaking decision, pr bid process, financial services or bor riting or opposing.				CERTIFICATION: I hereby certify correct statement in accordance we have a statement in accordance with a statement in accordance we have a statement in accordance with a statement in acc		