

State of Idaho

Ben Ysursa Secretary of State

> PO Box 83720 Boise, ID 83720-0080

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

LOBBYIST REPORT FORM



SEMI-ANNUAL

Page_	1_of_	2_{Page}	(s)
THIS SPA	CE FOR O	FFICE USE O	NLY
	Pn:	STFI	

LASIER

10 JUN -3 AM 8:42

To Be Filed By:

L-2 LOBBYISTS
(Sec. 67-6619)

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared 4NE 1,2010 (Day) (Mo.) (Yr.) 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 Item 3, at bottom of page.) *Total Amount for Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. 4 Employer No. 1 Employer No. 2 Employer No. 3 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services **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 seventy-five dollars (\$75) for a legislator, other holder of public office, executive officials and member(s) of their household. Item-Names of Legislators, Public and Executive Officials 2 Date Place Amount and Household Members in Group Continued on attached page(s) Item INSTRUCTIONS Employer(s) Name(s) and Address(es) Icaho 1000C Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st. No. 2 TO BE FILED WITH: Ben Ysursa No. 3 Secretary of State

No. 4

liem longer acting as a lobbiest!

Assignation was effective May 23,2010

Item 4 is no longer statutorily required.

item 5			proposed legislation, the number of the Senate solution or other legislative activity in which		LEGISLATIVE SUBJECT IDENTIFICATION			
3	the L	obbyist was supporting or op	posing.	Code	Subject	Code	Subject	
ıbject	Code	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs	
rom ta		Legislative Ident. Number	and Section Number		farming, and livestock		and controlled substances, health	
10III ta	aute)	Legislative ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals	
					and sports	18	Higher education	
				03	Banking, finance, credit and	19	Housing, construction, codes	
				05	investments	20	Insurance (excluding health	
				04	Children, minors, youth,	20	insurance)	
				04	senior citizens	21	Labor, salaries and wages,	
				05	Church and religion	21	collective bargaining	
				06	Consumer affairs	22	Law enforcement, courts,	
				07		22		
				07	Ecology, environment, pollution,	22	judges, crimes, prisons	
					conservation, zoning, land and	23	License, permits	
				00	water use	24	Liquor	
				08	Education	25	Manufacturing, distribution and	
				09	Elections, campaigns, voting,	2.	services	
					political parties	26	Natural resources, forest and	
				10	Equal rights, civil rights,		forest products, fisheries, mining	
					minority affairs		and mining products	
				11	Government, financing,	27	Public lands, parks, recreation	
					taxation, revenue, budget,	28	Social insurance, unemployment	
					appropriations, bids, fees, funds		insurance, public assistance,	
				12	Government, county		workmen's compensation	
				13	Government, federal	29	Transportation, highways,	
				14	Government, municipal		streets and roads	
				15	Government, special districts	30	Utilities, communications,	
				16	Government, state		televisions, radio, newspaper,	
							power, CATV, gas	
					•	31	Other (please specify)	
				1	ERTIFICATION: I hereby certify the		•	
				_	orrect statement in accordance with S	section o	77-0024 Idano Code.	
					George at	l	lud 6-1-	
CIII		y any rule, ratemaking decisi		L	obbyist signature		Date	
		ct bid or bid process, financia						
	bona 10	obbyist was supporting or opp	oosing.	4				
				Eı	mployer No. 1 signature		Date	
				_				
				E	mployer No. 2 signature		Date	
				Eı	mployer No. 3 signature		Date	
					mployer No. 4 signature		Date.	