

State of Idaho

Ben Ysursa Secretary of State

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

LOBBYIST	REPORT FORM
▼ ANNUAL	□ SEMI-ANNU

٦	SEMI-A	NNHAI	í
	OF MILE	TATA OV	L

Page	of	Page(s)
THIS SPACE	E FOR OFFI	CE USE ONLY

To Be Filed By:

LOBBYISTS (Sec. 67-6619)

11 JAN 27 AM 8:43

NE

			arly in black ink) t bottom of page								OE(STATE OF	OF STA
Lobbyis	's name and perm					Date	prepared				Period c		UADL
	ey Huerta	04	040								<u> </u>	year endi	ng
357 West Center Street Ste. 212 Pocatello, ID 83204					1	January 25, 2011				(Mo.)	(Day)	(Yr.)	
										12	31	10	
Item 1	Totals o	f all reportal	ble expenditures made o	r incurred b	oy Lobbyi	st or b	y Lobbyist's	Emplo	yer on l	ehalf o	f Lobby	ist's Emplo	yer.
Category of Expenditure Reimbursed Personal Living and Travel *Total Amount for					Proportionate amounts contributed by each employer (Identify Item 3, at bottom of page.)				ntify em	employers, under			
	Not Have to be R		All Employers	Employer No. 1		Employer No. 2		Employer No. 3			Employer	Employer No. 4	
Enterta	inment nd Refreshment		\$ 0.00	s	0.00) s			s			s	
	Accommodation		0.00	J J	0.00	'-			.			J	
Adverti			0.00	0.00		_ _	_						
Travel	Ū		0.00		0.00								
Telepho	one		0.00		0.00	_ _							
Other E	xpenses or Ser	vices	0.00	0.0		<u> </u>							
		Total	s 0.00	s	0.00	s	0	0.00	s		0.00	<u> </u>	0.00
*When t			re reporting for requires mu										member(s)
Item-	of their house	•		• •	<u> </u>								
2	Date Place				Amo	Names of Legislators, Public and Executive Officials ount and Household Members in Group							
NA NA			NA		N/	A NA							
	Continued on attac	ched page(s)											
INSTRUCTIONS					_ []			Employer(s) Name(s) and Address(es)					
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code					n l	No. 1 Portneuf Medical Center 651 Memorial Dr. Popcatello, ID 83201							
Fili			is due on January 31st. bbyist semi-annual repor	t due July	31st.	No. 2							
то	BE FILED WIT	B Secr PO	en Ysursa etary of State Box 83720 ID 83720-0080		!	No. 3							

	Subje	ect matter of proposed legislat	ion, the number of the Senate	te LEGISLATIVE SUBJECT IDENTIFICATION						
Item			legislative activity in which	LEGISLATIVE SUBJECT IDENTIFICATION						
4	1	obbyist was supporting or op		Code	Subject	Code	Subject			
C. Live	10.1	Dill Dark of	L.C. SHAN L	01	Agriculture, horticulture,	17	Health service, medicine, drugs			
Subject Code (from table)		Bill, Resolution or Other	Appropriation Bill Number		farming, and livestock		and controlled substances, health			
(Hom	table)	Legislative Ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals			
N.				1	and sports	18	Higher education			
N.	A	NA	NA	03	Banking, finance, credit and	19	Housing, construction, codes			
				ĺ	investments	20	Insurance (excluding health			
			}	04	Children, minors, youth,		insurance)			
					senior citizens	21	Labor, salaries and wages,			
			[05	Church and religion		collective bargaining			
			1	06	Consumer affairs	22	Law enforcement, courts,			
			J	07	Ecology, environment, pollution,		judges, crimes, prisons			
				1	conservation, zoning, land and	23	License, permits			
			1	08	water use	24	Liquor			
				09	Education	25 26	Manufacturing, distribution and services			
					Elections, campaigns, voting, political parties		Natural resources, forest and			
		1			Equal rights, civil rights, minority affairs		forest products, fisheries, mining			
							and mining products			
			}	11	Government, financing,	27	Public lands, parks, recreation			
				1	taxation, revenue, budget,	28	Social insurance, unemployment			
				1	appropriations, bids, fees, funds	-0	insurance, public assistance,			
			ł	12	Government, county		workmen's compensation			
				13	Government, federal	29	Transportation, highways,			
			ł	14	Government, municipal		streets and roads			
				15	Government, special districts	30	Utilities, communications,			
				16	Government, state		televisions, radio, newspaper,			
				i .			power, CATV, gas			
			})		31	Other (please specify)			
					ERTIFICATION: I hereby certify the correct statement in accordance with S					
Item		y any rule, ratemaking decisi		L	obbyist signature		Date			
5		ct bid or bid process, financia obbyist was supporting or opp			W. LAR					
	oona id	bodyist was supporting or opp	bosing.	┦	Your dens		Janony 25, 2011			
NA				Er	nployer No. 1 signature		(Degle			
				Er	nployer No. 2 signature		Date			
				Er	nployer No. 3 signature		Date			
				Er	nployer No. 4 signature		Date			