

LOBBYIST REPORT FORM



State of Idaho

Ben Yursa
Secretary of State

ANNUAL SEMI-ANNUAL

JAN -6 AM 8:30
SECRETARY OF STATE
STATE OF IDAHO

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 Ben Wolfinger 5500 Government Way / PO Box 9000 Coeur d'Alene, ID 83816-9000	Date prepared 01-03-11	Period covered <input checked="" type="checkbox"/> year ending (Mo.) (Day) (Yr.) 12 31 10
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Item 1	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.				
	Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)		
		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4
Entertainment					
Food and Refreshment	\$ 253.35	\$ 253.35	\$	\$	\$
Living Accommodations	668.32	668.32			
Advertising	0.00	0.00			
Travel	2,091.86	2,091.86			
Telephone	518.27	518.27			
Other Expenses or Services	228.76	228.76			
Total	\$ 3,760.56	\$ 3,760.56	\$ 0.00	\$ 0.00	\$ 0.00

*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.

Item-2	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.			
	Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group
N/A				

Continued on attached page(s)

INSTRUCTIONS	Item 3
<p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st.</p> <p>TO BE FILED WITH: Ben Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	Employer(s) Name(s) and Address(es)
	No. 1 Kootenai County Sheriff's Office 5500 Government Way PO Box 9000 Coeur
	No. 2
	No. 3
	No. 4

Item
4

Item 4 is no longer statutorily required.

Item 5			LEGISLATIVE SUBJECT IDENTIFICATION	
Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.			Code Subject	Code Subject
Subject Code (from table)	Bill, Resolution or Other Legislative Ident. Number	Appropriation Bill Number and Section Number		
12	H515		01 Agriculture, horticulture, farming, and livestock	17 Health service, medicine, drugs and controlled substances, health insurance, hospitals
15	H500		02 Amusements, games, athletics and sports	18 Higher education
22	H402		03 Banking, finance, credit and investments	19 Housing, construction, codes
22	H543		04 Children, minors, youth, senior citizens	20 Insurance (excluding health insurance)
29	H586		05 Church and religion	21 Labor, salaries and wages, collective bargaining
29	S1259		06 Consumer affairs	22 Law enforcement, courts, judges, crimes, prisons
29	S1259		07 Ecology, environment, pollution, conservation, zoning, land and water use	23 License, permits
29	S1352		08 Education	24 Liquor
			09 Elections, campaigns, voting, political parties	25 Manufacturing, distribution and services
			10 Equal rights, civil rights, minority affairs	26 Natural resources, forest and forest products, fisheries, mining and mining products
			11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds	27 Public lands, parks, recreation
			12 Government, county	28 Social insurance, unemployment insurance, public assistance, workmen's compensation
			13 Government, federal	29 Transportation, highways, streets and roads
			14 Government, municipal	30 Utilities, communications, televisions, radio, newspaper, power, CATV, gas
			15 Government, special districts	31 Other (please specify) _____
			16 Government, state	
			CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.	
			_____ Lobbyist signature Date	
			_____ Employer No. signature Date	
			_____ Employer No. 2 signature Date	
			_____ Employer No. 3 signature Date	
			_____ Employer No. 4 signature Date	

Item 6 Identify any rule, ratemaking decision, procurement, contract bid or bid process, financial services agreement or bond lobbyist was supporting or opposing