Rev. 05/2008

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

То Вс	Filed	Ву:	
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LOBBYISTS (Sec. 67-6619)

Page	of	Page(s)
THIS SPACE	E FOR OFFIC	IL USE ONLY

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STATE OF WAHO

(Type or print clearly in black ink)
See instructions at bottom of page

de imposion a delle in o page				
Lobbyist's name and permanent business address	Date prepared	Period cov	vered	
C. Tom Arkoosh - Capitol Law Group, PLLC 205 N. 10th Street, 4th Floor			month end	ding
Boise, ID 83702	3/10/2010	(Ma.)	(Day)	(Yr.)
	3/10/2010	2	28	2010

Category of Expenditure Reimbursed Personal Living and Travel	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)					
Expenses Pertaining to Lobbying Activity Do Not Have to be Reparted	All Carpioyers	Emplayer No. 1	Employer No. 2	Employer No. 3	Employer No. 4		
Entertainment Food and Refreshment	\$ 0.00	\$ 0.00	s 0.00	s 0.00	s0.00		
Living Accommodations	0.00	0.00	0.00	0.00	0.00		
Advertising	0.00	0.00	0.00	0.00	0.00		
Travel	0.00	0.00	0.00	0.00	0.00		
Telephone	0.00	0.00	0.00	0.00	0.00		
Other Expenses or Services	0.00	0.00	0.00	0.00	0.00		
Total	s_ 0.00	s0.00	s0.00	s0.00	s0.00		

*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.

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.

Names of Legislators, Public and Executive Officials

ltem-	member(s)	ineltiber(s) of their nousehold.						
2	Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group				
	N/A							
	Continued on s	l strehed page(s)						

Commission of analysis of the commission of the				
INSTRUCTIONS	item 3	Employer(s) Name(s) and Address(es)		
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code	No. I	Surface Water Coalition 357 6th Avenue West, Twin Falls, ID 83301		
Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.	No. 2			
TO BE FILED WITH: Ben Ysursa Secretary of State	No. 3			
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	No. 4			

item 4

Item 4 is no longer statutorily required.

tem	Subject matter of proposed legislation, the number of the Senate			LEGISLATIVE SUBJECT IDENTIFICATION				
5		ouse Bill, Resolution or other		C-3-	Subtan	Cada	Subject	
	ine u	ninyisi was supporting or opp	•	Code	Subject Agriculture, horticulture,	(7	-	
	table)	Bill, Resolution or Other Legislative ident. Number	Appropriation Bill Number and Section Number	02	farming, and livestock Amusements, games, athletics	17	and controlled substances, health insurance, hospitals	
]			1	and sports	18		
				03	Banking, finance, credit and	19	Housing, construction, codes	
	ĺ			ł	investments	2 0	Insurance (excluding health	
	ĺ			04	Children, minors, youth,		insurance)	
	}				senior citizens	21		
				05	Church and roligion		collective bargaining	
				06	Consumer affairs	22		
	ł			07	Ecology, environment, pollution,	••	judges, erimes, prisons	
					conservation, zoning, land and	23	License, permits	
					water use	24	Liquor	
	ĺ			08	Education	25	Manufacturing, distribution and	
	ł			09	Elections, campaigns, voting, political parties	26	services Natural resources, forest and	
	1			10	•	20	forest products, fisheries, mining	
	1			10	minority affairs		and mining products	
	ł			E L	Government, financing,	27	Public lands, parks, recreation	
	1	i		1	taxation, revenue, budget,	28	Social insurance, unemployment	
					appropriations, bids, fees, funds		insurance, public assistance,	
	1			12	Government, county		workmen's compensation	
				13	Government, federal	29	Transportation, highways,	
	- 1			14	Government, municipal		streets and roads	
				15	Government, special districts	30	Utilities, communications.	
	1			16	Government, state		televisions, radio, newspaper,	
	i			ĺ			power, CATV, gas	
	J			1	•	31	Other (please specify)	
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				1				
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	1	(١,	CENTIFICATION I have been also			
	- 1				CERTIFICATION: I hereby certify to correct statement in accordance with			
	T			┤ `	orter statement in accordance with		77-19024 10x110 Code.	
tem		any rule, ratemaking decision		İ			, ,	
6			or bond lobbyist was support-				2/10/00	
	ing or o	pposing.		1		_	3/1010	
				1 7	obbyist signature		/ Date /	
				,	2000 Julian Mariana		/ /	
				1				