

## 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

LOBBYISTS

ANNUAL

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				1.7-2	(Sec.	. <b>67-66</b> 19	))		SECR	ET AY OF STATE ATE OF IDAHO
(Type or print clearly in black ink) See instructions at bottom of page				_					STA	ATE OF IDAHO
Lobbyist's name and permanent business address						Date pre	pared			d covered
Fairy D. Hitchcock 2127 middlefield R			21			Dec 27,20		//	year ending	
21270 Middle Field							•	(M	(o.) (Day) (Yr.)	
Boise, ID 83704									10	2 31 2011
Item 1	Total	ls of all reportal	ole expenditures made o	r incurred by	Lobby	yist or by l	Lobbyist's Em	ployer on b	ehalf of Lot	obyist'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 earliem 3, at bottom of page.)			ited by each em	each employer (Identify employers, under			
		All Employers	Employe	r No. 1	Е	mployer No. 2	Emp	loyer No. 3	Employer No. 4	
Enterta Food an	inment nd Refreshm	ent	s	s_Ø		\$				_   s
Living.	Accommoda	tions						_		
Advertising				<u> </u>						
Travel		<i>Ø</i>		×	[		_			
Telephone				<u>Y                                    </u>					_	
Other Expenses or Services				<u>Y</u> _	_		_			
_				, , , , , , , , , , , , , , , , , , ,						
		Total	s	s_ <i>Ø</i>		s		_  \$		_ S
*When	the number of	employers you a	 re reporting for requires m	 ultiple L-2 forn	ns to be	 e filed a tota	d amount for all	employers	should be ente	red on Page 1.
Item-	The totals of their ho	•	ture of more than one hu	indred (\$100)	for a l	legislator,	other holder o	f public offi	ce, executive	e officials and member(s)
2	Date	Date Place			Amount		Names of Legislators, Public and Executive Officials and Household Members in Group			
		NA			Z	8				
<u> </u>	Continued on a	attached page(s)			_	Item				
INSTRUCTIONS			3	Employer(s) Name(s) and Address(es)						
1		67: Annual report	ny lobbyist registered ur -6617 Idaho Code is due on January 31st. obyist semi-annual repor		st.	No. 1 No. 2	140	7000 212 Bo	k Form	amily Advora
TO BE FILED WITH:  Ben Ysursa  Secretary of State					No. 3					

No. 4

Item or House Bill, Resolution or other legislative activity in which Code Subject Code Subject the Lobbyist was supporting or opposing. Agriculture, horticulture, Health service, medicine, drugs Appropriation Bill Number Subject Code Bill. Resolution or Other and controlled substances, health farming, and livestock and Section Number (from table) Legislative Ident. Number insurance, hospitals Amusements, games, athletics and sports 18 Higher education Banking, finance, credit and 19 Housing, construction, codes investments Insurance (excluding health Children, minors, youth, insurance) senior citizens 21 Labor, salaries and wages, 05 Church and religion collective bargaining Consumer affairs Law enforcement, courts, 06 Ecology, environment, pollution, judges, crimes, prisons 23 conservation, zoning, land and License, permits water use 24 Liquor 25 Manufacturing, distribution and 08 Education 09 Elections, eampaigns, voting, services political parties 26 Natural resources, forest and Equal rights, civil rights, forest products, fisheries, mining minority affairs and mining products 11 Government, financing, 27 Public lands, parks, recreation taxation, revenue, budget, Social insurance, unemployment appropriations, bids, fees, funds insurance, public assistance, 12 Government, county workmen's compensation 13 Government, federal Transportation, highways, 14 Government, municipal streets and roads 15 Government, special districts Utilities, communications, Government, state televisions, radio, newspaper, power, CATV, gas Other (please specify) CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code. Identify any rule, ratemaking decision, procurement, Item contract bid or bid process, financial services agreement or bond lobbyist was supporting or opposing. Employer No. 1 signature Date Employer No. 2 signature Date Employer No. 3 signature Date

Employer No. 4 signature

Date

Subject matter of proposed legislation, the number of the Senate

LEGISLATIVE SUBJECT IDENTIFICATION