| Rev. 11/2011  |               |   | LOBBYIST MONTHLY REPORT FORM                            |                |   |  |                                     |                | PageofPage(s) |                |                   |  |  |
|---|---------------|---|---|----------------|---|--|-------------------------------------|----------------|---------------|----------------|-------------------|--|--|
|   |               | State of Ida                                | To Be Filed By:   |                |   |  |                                     |                | TITIS SPA     | CE FOR OFFICE  | USE ONLY          |  |  |
| Ben Ysurse<br>Secretary of S  |               | a   | L-3 LOBBY (Sec. 67                                      |                | -6619)  |  | Se                                  |                | OF IDA        |                |                   |  |  |
|   |               | (Type or print clear<br>See instructions at |   |                | _   |  |                                     |                | STATE         | OF IDA         | НО                |  |  |
| •   |               | l permanent busine                          | ss address  |                |   | Date prepare   | :d                                  | _              | Perio         | d covered      |                   |  |  |
| Corey Surber  |               |   |   |                |   |  |                                     |                | month ending  |                |                   |  |  |
| Saint Alphonsus Health System<br>1055 N. Curtis Road                                |               |   |   |                |   |  |                                     | 5/10/11        |               |                | (Ma.) (Day) (Yr.) |  |  |
| Boise, ID 83706   |               |   |   |                |   |  |                                     |                |               | 4   30         | 2011              |  |  |
| Item  | Tot           | als of all reportal                         | ble expenditures made of                                | r incurred l   | by Lobbyis  | or by Lob  | byist's Empl                        | oyer on b      | chalf of Lol  |                |                   |  |  |
| Category of Expenditure   |               |   |   | Proportion     | Proportionale amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.) |  |                                     |                |               |                |                   |  |  |
| Expenses Permining to Lobbying Activity Do Not Have to be Reported                  |               |   | All Employers   | Employer No. 1 |   | Employer No. 2   |                                     | Employer No. 3 |               | Employer No. 4 |                   |  |  |
| Entertainment Food and Refreshment  |               |   | s 0.00  | s 0.00         |   | s  | \$                                  |                |               | s              |                   |  |  |
|   | Accommo       | -   | 0.00  | 0.0            |   |  |                                     |                |               |                |                   |  |  |
| Advert  |               |   | 0.00  | 0.0            |   |  |                                     |                |               | _              |                   |  |  |
| Travel  |               |   | 0.00  | 0.0            |   |  |                                     |                |               | -              |                   |  |  |
| Telepho   | nne           |   | 0.00  | 0.0            |   |  |                                     |                |               | -              |                   |  |  |
| •   |               | Services                                    | 0.00  | 0.0            |   |  |                                     |                |               | -              |                   |  |  |
| Other Expenses or Services  |               |   |   |                |   |  |                                     |                |               | 1              |                   |  |  |
|   |               | Total                                       | s0.00   | <b>s</b>       | 0,00  | . s  | 0.00                                | s              | 0.00          | <u> </u>       | 0.00              |  |  |
| *When   | the number of | of employers you a                          | re reporting for requires mu                            | ltiple L-2 fo  | oms to be fil   | cd a total am  | ount for all er                     | nployers s     | hould be ente | red on Page 1. |                   |  |  |
|   |               |   | iture of more than one h                                | undred do      | ilars (\$100)   | for a legis  | lator, other l                      | holder of      | public offic  | c, executive   | officials and     |  |  |
| Item-   | member        | s) of their house!                          | 1010.   |                |   | Names of Legislators, Public and Executive Officials                     |                                     |                |               |                |                   |  |  |
|   | 2 Date Place  |   |   | Amount         |   | and Household Members in Group   |                                     |                |               |                |                   |  |  |
| <b>□</b> '  | Continued or  | altached page(s)                            |   |                |   |  |                                     |                |               |                |                   |  |  |
| INSTRUCTIONS  |               |   |   |                | Ĭ   | iem<br>3   | Employer(s) Name(s) and Address(es) |                |               |                |                   |  |  |
| Who should file this form: Any lobbyist registered under Section 67-6617 Idsho Code |               |   |   |                |   | Saint Alphonsus Health System No. 1 1055 N. Curtis Road, Boise, ID 83706 |                                     |                |               |                |                   |  |  |
| Fjlin   | ig deadline   |   | ts due within fifteen (15)<br>vities of the past month. | ) days of th   | he No.  | 2  |                                     |                |               |                |                   |  |  |
| TO BE FILED WITH:  Ben Ysursa  Secretary of State                                   |               |   |   |                |   | No. 3  |                                     |                |               |                |                   |  |  |
| PO Box 83720<br>Boise, ID 83720-0080<br>Phone: (208) 334-2852 Fax; (208) 334-2282   |               |   |   |                |   | No. 4  |                                     |                |               |                |                   |  |  |

| Subject matter of proposed legislation, the number of the Senate   |  |  |  | LEGISLATIVE SUBJECT IDENTIFICATION                             |   |    |   |  |  |  |
|--|--|--|--|--|---|----|---|--|--|--|
| (Îrom  | or Higher Let Code (table) 7 7 9 9 7 7 7 |  |  | 01<br>02<br>03<br>04<br>05<br>06<br>07<br>08<br>09<br>10<br>11 | Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, compaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, laxation, revenue, budget, appropriations, bids, fees, funds Government, federal Government, municipal Government, special districts Government, state | 31 | Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify) |  |  |  |
| Item 5 Identify any rule, reternaking decision, procurement, contract, bid or bid process, financial services or bond lobbyis; was supporting or opposing. |  |  |  |  | orrect statement in accordance with   |    |   |  |  |  |
|  |  |  |  |  |   |    |   |  |  |  |