

**LOBBYIST MONTHLY REPORT FORM**



State of Idaho

Ben Ysursa  
Secretary of State

To Be Filed By:  
**L-3** LOBBYISTS  
(Sec. 67-6619)

11 FEB 17 AM 10:42  
SECRETARY OF STATE  
STATE OF IDAHO

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

|   |                                |  |
|---|--------------------------------|--|
| Lobbyist's name and permanent business address<br><br><b>Amy Holly</b><br>PO Box 1703<br>Boise ID 83702 | Date prepared<br><br>2/16/2011 | Period covered<br><input type="checkbox"/> month ending<br>(Mo.) (Day) (Yr.)<br>01   31   2011 |
|---|--------------------------------|--|

| 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<br><small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small> | *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   | \$ 0.00  | \$  | \$             | \$             | \$             |
| Food and Refreshment  | 0.00   |   |                |                |                |
| Living Accommodations   | 0.00   |   |                |                |                |
| Advertising   | 0.00   |   |                |                |                |
| Travel  | 0.00   |   |                |                |                |
| Telephone   | 0.00   |   |                |                |                |
| Other Expenses or Services  | 0.00   |   |                |                |                |
| <b>Total</b>  | <b>\$ 0.00</b>   | <b>\$ 0.00</b>  | <b>\$ 0.00</b> | <b>\$ 0.00</b> | <b>\$ 0.00</b> |

\*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 one hundred dollars (\$100) for a legislator, other holder of public office, executive officials and member(s) of their household. |        |   |  |
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| Date   | Place  | Amount | Names of Legislators, Public and Executive Officials and Household Members in Group |  |
|        |  |        |   |  |

Continued on attached page(s)

| <b>INSTRUCTIONS</b><br><br><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code<br><br><b>Filing deadline:</b> Monthly reports due within fifteen (15) days of the month for activities of the past month.<br><br>TO BE FILED WITH:<br>Ben Ysursa<br>Secretary of State<br>PO Box 83720<br>Boise, ID 83720-0080<br>Phone: (208) 334-2852 Fax: (208) 334-2282 | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Item 3</th> <th>Employer(s) Name(s) and Address(es)</th> </tr> </thead> <tbody> <tr> <td>No. 1</td> <td>Two Jinn Corporation<br/>1959 Palomar Oaks Way#200 Carlesbad CA 92011</td> </tr> <tr> <td>No. 2</td> <td>Exergy Development Group<br/>802 W Bannock #1200 Boise ID 83702</td> </tr> <tr> <td>No. 3</td> <td>Employers Resource Company<br/>1301 Vista Ave. Boise ID 83705</td> </tr> <tr> <td>No. 4</td> <td>CWI Inc (CH2MH Hilly/Washington Group Int'l)<br/>PO Box 1612 Idaho Falls ID 83401</td> </tr> </tbody> </table> | Item 3 | Employer(s) Name(s) and Address(es) | No. 1 | Two Jinn Corporation<br>1959 Palomar Oaks Way#200 Carlesbad CA 92011 | No. 2 | Exergy Development Group<br>802 W Bannock #1200 Boise ID 83702 | No. 3 | Employers Resource Company<br>1301 Vista Ave. Boise ID 83705 | No. 4 | CWI Inc (CH2MH Hilly/Washington Group Int'l)<br>PO Box 1612 Idaho Falls ID 83401 |
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| No. 1  | Two Jinn Corporation<br>1959 Palomar Oaks Way#200 Carlesbad CA 92011  |        |                                     |       |  |       |  |       |  |       |  |
| No. 2  | Exergy Development Group<br>802 W Bannock #1200 Boise ID 83702  |        |                                     |       |  |       |  |       |  |       |  |
| No. 3  | Employers Resource Company<br>1301 Vista Ave. Boise ID 83705  |        |                                     |       |  |       |  |       |  |       |  |
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| Category of Expenditure<br><small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small> | *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   | \$ 0.00  | \$  | \$             | \$             | \$             |
| Food and Refreshment  | 0.00   |   |                |                |                |
| Living Accommodations   | 0.00   |   |                |                |                |
| Advertising   | 0.00   |   |                |                |                |
| Travel  | 0.00   |   |                |                |                |
| Telephone   | 0.00   |   |                |                |                |
| Other Expenses or Services  | 0.00   |   |                |                |                |
| <b>Total</b>  | \$ 0.00  | \$ 0.00   | \$ 0.00        | \$ 0.00        | \$ 0.00        |

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| Item-2 | The totals of each expenditure of more than one hundred dollars (\$100) for a legislator, other holder of public office, executive officials and member(s) of their household. |        |   |  |
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| <b>INSTRUCTIONS</b>  | <b>Item 3</b>                                | Employer(s) Name(s) and Address(es)   |
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| Food and Refreshment  | 0.00   |   |                |                |                |
| Living Accommodations   | 0.00   |   |                |                |                |
| Advertising   | 0.00   |   |                |                |                |
| Travel  | 0.00   |   |                |                |                |
| Telephone   | 0.00   |   |                |                |                |
| Other Expenses or Services  | 0.00   |   |                |                |                |
| <b>Total</b>  | <b>\$ 0.00</b>   | <b>\$ 0.00</b>  | <b>\$ 0.00</b> | <b>\$ 0.00</b> | <b>\$ 0.00</b> |

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|   |  | Employer No. 1  | Employer No. 2 | Employer No. 3 | Employer No. 4 |
| Entertainment   | \$ 0.00  | \$ _____  | \$ _____       | \$ _____       | \$ _____       |
| Food and Refreshment  | 0.00   | _____   | _____          | _____          | _____          |
| Living Accommodations   | 0.00   | _____   | _____          | _____          | _____          |
| Advertising   | 0.00   | _____   | _____          | _____          | _____          |
| Travel  | 0.00   | _____   | _____          | _____          | _____          |
| Telephone   | 0.00   | _____   | _____          | _____          | _____          |
| Other Expenses or Services  | 0.00   | _____   | _____          | _____          | _____          |
| <b>Total</b>  | <b>\$ 0.00</b>   | <b>\$ 0.00</b>  | <b>\$ 0.00</b> | <b>\$ 0.00</b> | <b>\$ 0.00</b> |

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|--|--|--------|-------------------------------------|-------|--|-------|---|-------|---|-------|---|
| Item 3   | Employer(s) Name(s) and Address(es)  |        |                                     |       |  |       |   |       |   |       |   |
| No. 1  | Doral Dental USA, LLC<br>12121 N Corporate Parkway Mequon WI 53092   |        |                                     |       |  |       |   |       |   |       |   |
| No. 2  | AREVA NC, LLC<br>4800 Hampden Ln # 1100 Bethesda MD 20814  |        |                                     |       |  |       |   |       |   |       |   |
| No. 3  | Associated General Contractors of Idaho<br>1649 Shoreline Dr Boise ID 83702  |        |                                     |       |  |       |   |       |   |       |   |
| No. 4  | Clear Springs Foods Inc<br>PO Box 712 Buhl ID 83316  |        |                                     |       |  |       |   |       |   |       |   |

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| Living Accommodations   | 0.00   |   |                |                |                |
| Advertising   | 0.00   |   |                |                |                |
| Travel  | 0.00   |   |                |                |                |
| Telephone   | 0.00   |   |                |                |                |
| Other Expenses or Services  | 0.00   |   |                |                |                |
| <b>Total</b>  | \$ 0.00  | \$ 0.00   | \$ 0.00        | \$ 0.00        | \$ 0.00        |

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|   | No. 1         | FMC Corporation<br>1101 Pennsylvania #235 Washington DC 20004        |
|   | No. 2         | Hospital Corporation of America<br>One Park Plaza Nashville TN 37203 |
|   | No. 3         | Idaho School Boards Association<br>PO Box 9797 Boise ID 83707        |
|   | No. 4         | Intermountain Gas Company<br>PO Box 7608 Boise ID 83707              |

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| Travel  | 0.00                            |   |                |                |                |
| Telephone   | 0.00                            |   |                |                |                |
| Other Expenses or Services  | 0.00                            |   |                |                |                |
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|  | No. 1         | Transcanada<br>1400 SW 5th Ave #900 Portland OR 97201                            |
|  | No. 2         | Eli-Lilly Corporation<br>161 St Anthony Ave #820 St Paul MN 55103                |
|  | No. 3         | Motion Picture Association<br>1600 Eye St NW Washington DC 20006                 |
|  | No. 4         | PNGC (Pacific NW Generating Cooperative)<br>711 NE Halsey #200 Portland OR 97232 |

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| Entertainment   | \$ 0.00                         | \$  | \$             | \$             | \$             |
| Food and Refreshment  | 0.00                            |   |                |                |                |
| Living Accommodations   | 0.00                            |   |                |                |                |
| Advertising   | 0.00                            |   |                |                |                |
| Travel  | 0.00                            |   |                |                |                |
| Telephone   | 0.00                            |   |                |                |                |
| Other Expenses or Services  | 0.00                            |   |                |                |                |
| <b>Total</b>  | \$ 0.00                         | \$ 0.00   | \$ 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<br>Date | Place | Amount | Names of Legislators, Public and Executive Officials and Household Members in Group |
|----------------|-------|--------|---|
|                |       |        |   |

Continued on attached page(s)

|   |   |
|---|---|
| <b>INSTRUCTIONS</b><br><br><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code<br><br><b>Filing deadline:</b> Monthly reports due within fifteen (15) days of the month for activities of the past month.<br><br><b>TO BE FILED WITH:</b><br>Ben Ysursa<br>Secretary of State<br>PO Box 83720<br>Boise, ID 83720-0080<br>Phone: (208) 334-2852 Fax: (208) 334-2282 | <b>Item 3</b><br>Employer(s) Name(s) and Address(es)  |
|   | No. 1 Refined Energy Holdings (ak SE Idaho Energy)<br>116 Radio Circle #208 Mt Kisko NY 10549 |
|   | No. 2 Idaho Association of Naturopathic Physicians<br>2288 Call Creek Dr. Pocatello ID 83201  |
|   | No. 3 Church Street Health Management<br>618 Church St. # 520 Nashville TN 37219              |
|   | No. 4 Northwest Grocery Association<br>8565 SW Salish Ln #100 Wilsonville OR 97070            |

**LOBBYIST MONTHLY REPORT FORM**



State of Idaho

Ben Ysursa  
Secretary of State

To Be Filed By:  
**L-3** LOBBYISTS  
(Sec. 67-6619)

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

|   |   |   |
|---|---|---|
| Lobbyist's name and permanent business address<br><br><b>Amy Holly</b><br>PO Box 1703<br>Boise ID 83702 | Date prepared<br><br><p style="text-align: center;">2/16/2011</p> | Period covered<br><input type="checkbox"/> month ending<br>(Mo.) (Day) (Yr.)<br><p style="text-align: center;">01   31   2011</p> |
|---|---|---|

| 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<br>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity<br><b>Do Not Have to be Reported</b> | *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  | \$ 0.00  | \$  | \$             | \$             | \$             |
| Food and Refreshment   | 0.00   |   |                |                |                |
| Living Accommodations  | 0.00   |   |                |                |                |
| Advertising  | 0.00   |   |                |                |                |
| Travel   | 0.00   |   |                |                |                |
| Telephone  | 0.00   |   |                |                |                |
| Other Expenses or Services   | 0.00   |   |                |                |                |
| <b>Total</b>   | <b>\$ 0.00</b>   | <b>\$ 0.00</b>  | <b>\$ 0.00</b> | <b>\$ 0.00</b> | <b>\$ 0.00</b> |

\*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 one hundred dollars (\$100) 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 |  |
|        |  |        |   |  |

Continued on attached page(s)

| <b>INSTRUCTIONS</b><br><br><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code<br><br><b>Filing deadline:</b> Monthly reports due within fifteen (15) days of the month for activities of the past month.<br><br>TO BE FILED WITH:<br><p style="text-align: center;">Ben Ysursa<br/>Secretary of State<br/>PO Box 83720<br/>Boise, ID 83720-0080<br/>Phone: (208) 334-2852 Fax: (208) 334-2282</p> | <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">Item 3</th> <th>Employer(s) Name(s) and Address(es)</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">No. 1</td> <td><b>Amalgamated Sugar</b><br/>1951 S Saturn Way #100 Boise ID 83709</td> </tr> <tr> <td style="text-align: center;">No. 2</td> <td></td> </tr> <tr> <td style="text-align: center;">No. 3</td> <td></td> </tr> <tr> <td style="text-align: center;">No. 4</td> <td></td> </tr> </tbody> </table> | Item 3 | Employer(s) Name(s) and Address(es) | No. 1 | <b>Amalgamated Sugar</b><br>1951 S Saturn Way #100 Boise ID 83709 | No. 2 |  | No. 3 |  | No. 4 |  |
|---|--|--------|-------------------------------------|-------|---|-------|--|-------|--|-------|--|
| Item 3  | Employer(s) Name(s) and Address(es)  |        |                                     |       |   |       |  |       |  |       |  |
| No. 1   | <b>Amalgamated Sugar</b><br>1951 S Saturn Way #100 Boise ID 83709  |        |                                     |       |   |       |  |       |  |       |  |
| No. 2   |  |        |                                     |       |   |       |  |       |  |       |  |
| No. 3   |  |        |                                     |       |   |       |  |       |  |       |  |
| No. 4   |  |        |                                     |       |   |       |  |       |  |       |  |



**Item 4** 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.

| Subject Code (from table) | Bill, Resolution or Other Legislative Ident. Number | Appropriation Bill Number and Section Number |
|---------------------------|---|--|
|                           |   |  |

**LEGISLATIVE SUBJECT IDENTIFICATION**

- | Code | Subject   | Code | Subject  |
|------|---|------|--|
| 01   | Agriculture, horticulture, farming, and livestock                                   | 17   | Health service, medicine, drugs and controlled substances, health insurance, hospitals |
| 02   | Amusements, games, athletics and sports   | 18   | Higher education   |
| 03   | Banking, finance, credit and investments  | 19   | Housing, construction, codes   |
| 04   | Children, minors, youth, senior citizens  | 20   | Insurance (excluding health insurance)   |
| 05   | Church and religion   | 21   | Labor, salaries and wages, collective bargaining                                       |
| 06   | Consumer affairs  | 22   | Law enforcement, courts, judges, crimes, prisons                                       |
| 07   | Ecology, environment, pollution, conservation, zoning, land and water use           | 23   | License, permits   |
| 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   |      |  |

**Item 5** Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.

*Ann Helle*  
 Lobbyist signature

2-16-2011  
 Date