

Rev. 11/2011

LOBBYIST MONTHLY REPORT FORM

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State of Idaho

Ben Yursa
Secretary of State

To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

11 APR -5 PM 2:19
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 Blue Cross of Idaho Health Service, Inc. 3000 E. Pine Avenue Meridian, ID 83642	Date prepared 4/5/11	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) 3 31 2011
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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 <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	\$ 0.00	\$	\$	\$
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 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	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)

<p align="center">INSTRUCTIONS</p> <p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.</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>	Item 3	Employer(s) Name(s) and Address(es)
	No. 1	Blue Cross of Idaho Health Service, Inc.
	No. 2	3000 E. Pine Avenue Meridian, ID 83642
	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
17	none	none

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, rulemaking 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.

[Handwritten Signature] _____
 Lobbyist signature

4/5/11 _____
 Date