Rev 11 2011

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

To Be Filed By.

LOBBYISTS L-3 (Sec. 67-6619) Page___of___Page(s)
THIS SPACE FOR OFFICE USE ONLY

11 APR -6 AM 8:57

SECRETARY OF STATE STATE OF IDAHO

	(Type or print clear										
See instructions at bottom of page Lobbyist's name and permanent business address					Date prepared			Period covered			
Portia Rauer 345 Bobwhite Ct., Ste. 150									month	ending	
						4-5-11		(Day)			
Boise, 10 87306									(Mo) (Day) (Yr)		
	and a supplication of the	and the state of t						3	31	11	
Item I	Totals of all reportal	ble expenditures made o	r incurred by	y Lobbyist	or by	Lobbyist's Emple	yer on bel	alf of Lobb	yist's Em	ployer.	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity		*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)								
	Not Have to be Reported		Employer No. 1		Employer No. 2		Employer No. 3		Emple	oyer No 4	
Enterta Food as	inment id Refreshment	\$	ss		\$		\$		s		
Living	Accommodations										
Adverti	sing							F-\$ 1:11.5-400.00000000000000			
Travel			***************		_						
Telepho	one									······································	
Other F	xpenses or Services								-		
	Total	s0.00	s	0.00	\$_	0.00	\$	0.00	\$	0.00	
*When to	The totals of each expend member(s) of their house		for a	legislator, other l	nolder of p	ublic office, Public and E	executiv	e officials and			
	Continued on attached page(s)							ld <u>M</u> embers i			
INSTRUCTIONS					ет 3	Em	Employer(s) Name(s) and Address(es)				
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code					Neuroscience Associates 6140 W. Curtisian Ave., Ste. 400, Boise, ID 83704						
Fili	ng deadline: Monthly repo month for act	orts due within fifteen (1: tivities of the past month		e No	2						
TO BE FILED WITH: Ben Ysursa Secretary of State					3						
	PO Boise,	Box 83720 ID 83720-0080 852 Fax: (208) 334-22	282	No	4						

Item	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which			LEGISLATIVE SUBJECT IDENTIFICATION					
4		use Bill, Resolution or other obbylist was supporting or op		1	Subject		Subject		
Subject (from to		Bill, Resolution or Other Legislative ident. Number	Appropriation Bill Number and Section Number	01	Agriculture, horniculture, farming, and livestock Amusements, games, athletics	17	Health service, medicine, drugs and controlled substances, health insurance, hospitals		
17		HB162		03	and sports Banking, finance, credit and	18 19	Higher education Housing, construction, codes		
	ļ			04	investments Children, minors, youth,	20	Insurance (excluding health insurance)		
	ļ				senior citizens	21	Labor, salaries and wages		
	,			0.5	Church and religion	213	collective bargaining		
				06	Consumer affairs	22	Law enforcement, courts,		
				07	Ecology, environment, pollution,	3.0	judges, crimes, prisons		
	1		100 mm m m m m m m m m m m m m m m m m m		conservation, zoning, land and	23 24	License, permits		
	1			08	water use Education	25	Liquor Manufacturing, distribution and		
	1			09	Elections, campaigns, voting,	2.13	services		
	To the second second			10	political parties Equal rights, civil rights, minority affairs	26	Natural resources, forest and forest products, fisheries, mining and mining products		
				11	Government, financing,	27	Public lands, parks, recreation		
					taxation, revenue, budget, appropriations, bids, fees, funds	28	Social insurance, unemployment insurance, public assistance.		
	ļ			12	Government, county		workmen's compensation		
				13	Government, federal	29	Transportation, highways,		
	1			14	Government, municipal		streets and roads		
			www.	15	Government, special districts Government, state	30	Utilities, communications, televisions, radio newspaper		
	100					31	power, CATV, gas Other (please specify)		
					401				
item 5	(bid or hid process training) services or bond labbuist was support.			CERTIFICATION 1 hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Cude. Filter					
				1 ,	obbyist signature		Date		