Rev 11/2011

State of Idaho

Ben Ysursa Secretary of State

LOBBYIST REPORT FORM	I	OBBVIST	REPORT	FORM
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☐ ANNUAL ☑ SEMI-ANNUAL

Ряде	ot'	Papc(s)
THIS SPACE	F FOR OFFI	ICE USE ONLY

To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619)

11 AUG -1 AM 8: 02

STATE OF IDAHO

			nly in black ink) t bottom of page						217	IL UI	10	Allo	
Lobbyist's name and permanent business address						Date prepared				Per	Period covered		
Marvin Markus											year ending		
200 West Street, 33rd FI								7/21/1	1		(Mo.)	(Day)	(Yr)
New York, NY 10282										'	12	31	2011
													l
Item 1			ole expenditures made o								_		уст.
Category of Expenditure Reimbursed Personal Living and Travel Expenses Personal Living and Travel Do Not Have to be Reported			l -		ionate amounts contributed by each employer (Identity at bottom of page.)			tity emplo	employers, under				
			All Employers	Employer No 1			Employer No.		Employer N			Employer No. 4	
Entertainment Food and Refreshment			\$ 0.00	s			s		s			S	
	Accommodat		0.00										
Advert		· ·	0.00								_		
Travel			0,00								_		
Telepho	one		0.00								-		
,	Expenses or S	crvices	0.00										
									-				
		Total	s 0.00	s	0.0	00	\$	0.00	S	0.0	00	s	0.00
Item-	of their hou	schold.	Place	Amor			Names of Legislators, Public and Executive Official and Household Members in Group					ials	
N/A							N/A			N/A			
	Continued on at	tached page(s)		_									
INSTRUCTIONS						Iten 3	71	Employer(s) Name(s) and Address(cs)					
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code)II	No. 1 Soldman, Sachs & Co. 200 West Street, New York, NY 10282							
Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi annual report due July 31st.					31sı.	No. 2	10-		n-11 &				
TO BE FILED WITH:													
Ben Ysursa Secretary of State PO Box 83720 Boise, ID 8.3720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282						No. 3	_						
						No 4							

lteni			ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION						
4		nise Bill, Resolution or other obbyist was supporting or op	legislative activity in which	Code	Subject	Code	Subject			
			01	Agriculture, horticulture,	17	Health service, medicine, drugs				
	ject Code Bill, Resolution or Other Appropriation Bill Number			farming, and livestock		and controlled substances, health				
(from Inble) Legislative Ident. Number and Section Number		02	Amusements, games, athletics	• • •	insurance, hospitals					
B.17		NI/A	N/A	0.3	and sports	18	Higher education			
N/A	Α,	N/A	IN/A	03	Banking, finance, oredit and investments	19 20	Housing, construction, codes Insurance (excluding health			
				04	Children, minors, youth,	20	insurance)			
				"	senior citizens	21	Labor, salaries and wages,			
				05	Church and religion	_,	collective bargaining			
				06	Consumer affairs	22	Law enforcement, courts,			
			07	Ecology, environment, pollution,		judges, crimes, prisons License, permits Liquor				
			1	conservation, zoning, land and	23					
				water use	24					
				08	Education	25	Manufacturing, distribution and services			
			09	Elections, campaigns, voting, political parties	26	Natural resources, forest and				
		1	10	Equal rights, civil rights,		forest products, fishenes, mining				
				1	minority affairs		and mining products			
				11	Government, financing,	27	Public lands, parks, recreation			
				}	taxation, revenue, budget,	28	Social insurance, unemployment			
			1	ļ	appropriations, bids, fees, flinds		insurance, public assistance,			
				12	Government, county		workinen's compensation			
				13	Government, federal	29	fransportation, highways,			
				14	Government, municipal	10	streets and roads			
			1	16	Government, special districts Government, state	30	Utilities, communications. televisions, radio, newspaper.			
				'''	three mont, state		power, CATV, gas			
				ĺ		31	Other (please specify)			
Item 5	contrac	y any rule, ratemaking decisi et bid or bid process, financia alabyist was supporting or opp	is, procurement, services agreement or sing.	CERTIFICATION: 1 hereby certify that the above is a true, complete a carried statement in accordance with Section 67-6624 Idaho Cade.						
N/A				****	nployer No. 2 signature		Date			
				Ei	uployer No. 3 signature		Date			
				En	nployer No. 4 signature		Dute			