Rev. 05/2008



State of Idaho

Ben Ysursa Secretary of State

(Type or print clearly in black ink)

🖄 ANNUAL 🗌 SEMI-ANNUAL

Page	1	of	1	Page(s)
THIS SP	ACE F	OR O	FFICE	USE ONLY

Ysursa To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619)

13 MI 28 AN IO: 39

EDITE OF IDAHO

STATE OF IDAHO

See instructions at bottom of page

Lobbyrst's name and permanent business address

PAUL J. DEVEAU

2465 OVERLAND RD.

BOISE, ID 83705-3155

Date prepared

JANUARY 28, 2013

Y year ending

(Mo.) (Day) (Yr.)

Category of Expenditure Reimbursed Personal Living and Travel	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		Employer No. I	Employer No. 2	Employer No. 3	Employer No. 4
Entertainment Food and Refreshment	<u>\$ 0.00</u>	\$ 0.00	s	s	\$
Living Accommodations	0.00	0.00			
Advertising	0.00	0.00			
Travel	0.00	_0.00_			
Telephone	0.00	0.00	_		
Other Expenses or Services	_0.00	_0.00			-
Total	s 0.00	\$ 0.00	s	5	s

*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.

The totals of each expenditure of more than seventy-five dollars (\$75) for a legislator, other holder of public office, executive officials and

Continued on attached page(s)

INSTRUCTIONS	Item 3	Employer(s) Name(s) and Address(es)
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code	No. 1	BOISE PROJECT BOARD OF CONTROL 2465 OVERLAND RD., BOISE, ID 83705
Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st.	No. 2	
TO BE FILED WITH: Ben Ysursa Secretary of State	No. 3	
PO Box 83720 Boisc, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	No. 4	

ītem 4	Expen	ditures:	made by the lobbyi	shalf of any Legislator, Pub	oyer in the nature of contributions of money or other tangible or intangible personablic or Executive Official or Household Member(s).				
7	Date Amount Name of Legis				lator, Public or Executive Official and Household Member(s) Receiving or Benefiting				
NONE			0.00	NONE					
Item	or Ho	use Bill,	Resolution or other	ion, the number of the Senate legislative activity in which	LEGISLATIVE SUBJECT IDENTIFICATION				
Subject (from NONE	the Lo	Bill, R Legisla	ras supporting or oppositive Ident, Number		Code Subject Ol Agriculture, horticulture, farming, and livestock Ol Amusements, games, athletics and sports Ol Banking, finance, credit and investments Ol Children, minors, youth, senior citizens Ol Church and religion Ol Ecology, environment, pollution, conservation, zoning, land and water use Education Education Education Equal rights, civil rights, minority affairs Ol Government, financing, taxation, revenue, budget, appropriations, bids, feets, funds Government, county Government, special districts Government, special districts Government, state Code Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education 19 Housing, construction, codes Insurance (excluding health insurance) 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 Other (please specify)				
Item 6	contrac	t bid or i	e, raternaking decision of process, financial as supporting or opp	services agreement or	CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code. Complete and Complete and Code. Complete and Code.				