#### Rev. 11/2011

### LOBBYIST MONTHLY REPORT FORM



#### State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3

LOBBYISTS (Sec. 67-6619)

Page\_\_\_\_of\_\_\_Page(s)
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# SECRETARY OF STATE STATE OF IDAHO

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

|   |                | instructions at |                                    |                |               |  |                 |                            |                           |                                       |  |
|---|----------------|-----------------|------------------------------------|----------------|---------------|--|-----------------|----------------------------|---------------------------|---------------------------------------|--|
| Lobbyist's name and permanent business address                                      |                |                 |                                    |                |               | Date prepared Period covered   |                 |                            |                           |                                       |  |
| Julie Hart<br>12623 N 14th Ave  |                |                 |                                    |                | 3             | 3/9/2013 month endin   |                 |                            |                           | ding                                  |  |
| Boise, ID 83714   |                |                 |                                    |                |               |  |                 |                            |                           |                                       |  |
| ,   |                |                 |                                    |                |               |  |                 | (Mo.)                      | 1                         | (Yr.)                                 |  |
| Ŧ. I  |                |                 |                                    |                |               |  |                 | 2                          | 28                        | 2013                                  |  |
| Item<br>1   | Totals         | of all reportal | ble expenditures made of           | or incurred by | Lobbyist o    | r by Lobbyist's Empl   | oyer on behalf  | of Lobby                   | vist's Emplo              | yer.                                  |  |
| Category of Expenditure Reimbursed Personal Living and Travel                       |                |                 | *Total Amount for<br>All Employers |                |               | ints contributed by each employer (Identify employers, under of page.) |                 |                            |                           |                                       |  |
| Expenses Pertaining to Lobbying Activity  Do Not Have to be Reported                |                |                 | 1 7                                |                |               | Employer No. 2 Employer N  |                 | No. 3                      | No. 3 Employer No. 4      |                                       |  |
| Entertai  |                |                 | <b>↑</b> \$224.67                  | # #0 00        |               | ⊕ ¢100 ∩2  | e en no         |                            | • <b>¢</b> 16 6           | 4                                     |  |
| Food and Refreshment  |                |                 | \$ \$234.67                        | \$\\$0.00      |               | \$ \$188.03  | \$ \$0.00       |                            | \$\\\\$\\\$46.64\\\\$0.00 |                                       |  |
| Living Accommodations   |                |                 | \$0.00                             | \$0.00         |               | \$0.00   | \$0.00          |                            | \$0.00                    |                                       |  |
| Advertis  | sing           |                 | \$0.00                             | \$0.00         |               | \$0.00   | \$0.00          |                            |                           |                                       |  |
| Travel  |                |                 | \$0.00                             | \$0.00         |               | \$0.00   | \$0.00          |                            | \$0.00                    |                                       |  |
| Telepho   | ne             |                 | \$0.00                             | \$0.00         |               | \$0.00   | _ \$0.00        |                            | \$0.00                    |                                       |  |
| Other Expenses or Services  |                |                 | \$0.00                             | \$0.00         |               | \$0.00   | \$0.00          |                            | \$0.00                    |                                       |  |
| Total   |                |                 | <b>\$</b> \$234.67                 | \$ \$0.00      |               | <b>\$</b> \$188.03   | \$ \$0.00       | \$ \$0.00       \$ \$46.64 |                           | 4                                     |  |
|   |                |                 | 7                                  |                |               | <u> </u>   | 1               |                            | <del></del>               | · · · · · · · · · · · · · · · · · · · |  |
| *When t   |                |                 | are reporting for requires m       |                |               |  |                 |                            |                           |                                       |  |
|   |                |                 | diture of more than one            | hundred dolla  | ırs (\$100) 1 | for a legislator, other  | holder of publ  | ic office,                 | executive o               | officials and                         |  |
| Item- member(s) of their household.   |                |                 |                                    |                |               | Names of Legislators, Public and Executive Officials                   |                 |                            |                           |                                       |  |
|   | Date           |                 | Place                              |                | Amount        |  | and Household I | Members i                  | 1 Group                   |                                       |  |
|   |                |                 |                                    |                |               |  |                 |                            |                           |                                       |  |
|   |                |                 |                                    |                |               |  |                 |                            |                           |                                       |  |
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|   |                |                 |                                    |                |               |  |                 |                            |                           |                                       |  |
| <b>\</b>  | Continued on a | ttached page(s) |                                    |                |               |  |                 |                            |                           |                                       |  |
| INSTRUCTIONS  |                |                 |                                    |                |               | tem 3 Employer(s) Name(s) and Address(es)                              |                 |                            |                           |                                       |  |
|   |                |                 |                                    |                | $\dashv \Box$ | Atlanta Gold   |                 |                            |                           |                                       |  |
| Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code |                |                 |                                    |                |               | No. 1<br>421 W Bank Dr Boise ID 83706 USA                              |                 |                            |                           |                                       |  |
| Ests  | a doodline     | Monthly none    | orts due within fifteen (1         | 5) days of the |               | Girl Scouts Silver S   | age             |                            |                           | <del></del>                           |  |
| r IIII  | ig deadilile.  |                 | tivities of the past mont          |                | No. 2         | 1410 Etheridge Ln  | Boise ID 83704  | USA                        |                           |                                       |  |
| ТОІ   | BE FILED W     |                 |                                    |                |               | Idaho Clean Energy Association   |                 |                            |                           |                                       |  |
| Ben Ysursa<br>Secretary of State  |                |                 |                                    |                |               | No. 3<br>PO Box 1212 Boise ID 83701 USA                                |                 |                            |                           |                                       |  |
| PO Box 83720<br>Boise, ID 83720-0080  |                |                 |                                    |                |               | Idaho Press Club   |                 |                            |                           |                                       |  |
| Phone: (208) 334-2852 Fax: (208) 334-2282   |                |                 |                                    |                |               | No. 4<br>PO Box 2221 Boise ID 83701 USA                                |                 |                            |                           |                                       |  |

| Sub       | Subject matter of proposed legislation, the number of the Senate            |  |  | LEGISLATIVE SUBJECT IDENTIFICATION   |  |   |  |  |  |
|-----------|---|--|--|--|--|---|--|--|--|
| Item or H | louse Bill, Resolution or other<br>Lobbyist was supporting or op            | legislative activity in which                                | Code 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 | Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, special districts Government, state |  | Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining 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 Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify) |  |  |  |
| bid or    | ify any rule, ratemaking decisite bid process, financial services opposing. | on, procurement, contract,<br>s or bond lobbyist was support | -  | CERTIFICATION: I hereby certify to correct statement in accordance with  Electronically signed  Lobbyist signature   |  | , 1   |  |  |  |

## **Lobbyist Report Form Attachment**

| Julie Hart<br>12623 N 14th Ave<br>Boise, ID 83714 |  |
|---|--|

| Entertainment<br>Food &<br>Refreshment | Living<br>Accommodations | Advertising | Travel      | Telephone   | Other<br>Expenses or<br>Services | Employer Total       |
|--|--------------------------|-------------|-------------|-------------|----------------------------------|----------------------|
| \$0.00                                 | \$0.00                   | \$0.00      | \$0.00      | \$0.00      | \$0.00                           | \$0.00               |
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|  |                          |             |             |             |                                  |                      |
|  | Refreshment              | Refreshment | Refreshment | Refreshment | Refreshment                      | Refreshment Services |

| Employer No. | Employer Name(s)     | Employer Address(es)                     |
|--------------|----------------------|--|
| No.5         | Kidney Care Partners | 2550 M Street NW Washington DC 20037 USA |
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