# LOBBYIST MONTHLY REPORT FORM



# State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

**L-3** 

LOBBYISTS (Sec. 67-6619)

Page 1 of 3 Page(s)
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13 APR 19 AM 11:58

STATE OF IDAHO

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

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•	•	ermanent busine	ss address			Date	orepared		Period	covered	
	Smith W. Quilce	da St								month ending	
	, ID 83634					4-19-20		(Mo.	) (Day) (Yr.)		
										3   31   13	
Item 1	Totals	of all reportal	ble expenditures made o	or incurred by	y Lobb	yist or b	y Lobbyist's Emp	oyer on behalf	of Lobb	yist's Employer.	
Ca Reimbu		iving and Travel	*Total Amount for All Employers	1 1	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)						
	Not Have to be	obbying Activity e <b>Reported</b>	An Employers	Employer No. 1		1	Employer No. 2	Employer No. 3		Employer No. 4	
Entertainment Food and Refreshment			\$0.00	s0	.00	\$_	0.00	\$0.0	0	s0.00	
Living Accommodations			0.00	0.00			0.00	0.00	)	0.00	
Adverti			0.00	0.00			0.00	0.00	)	0.00	
Travel	Ü		0.00	0.00			0.00	0.00	)	0.00	
Telepho	ne		0.00	0.00			0.00	0.00	)	0.00	
Other E	xpenses or S	ervices	0.00	0.00			0.00	0.00	)	0.00	
	-	Total	s_ 0.00	s0.00			0.00	<b>s</b> 0.00	0	\$0.00	
<b>*</b> 3371 4	h h 6	1	 are reporting for requires m		40 le		otal amount for all a		l ha antara	d on Page 1	
whent										fice, executive officials	
Item-		er(s) of their ho									
2	Date		Place	ace A		mount	Names o	-	ors, Public and Executive Officials sehold Members in Group		
	Continued on a	ttached page(s)				Itom					
INSTRUCTIONS					3	Employer(s) Name(s) and Address(es)					
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						No. 1 (Idaho Chapter) Am. Assoc. of Architects 1674 Hill Rd Boise ID 83702					
						No. 2 (Idaho Chapter) Am. Assoc. of Naturopathic Physicians 4219 W Emerald Boise ID 83713					
· -											
TO BE FILED WITH:  Ben Ysursa  Secretary of State							No. 3 Idaho Cosmetology School Association 557 Mariah Ave Rexburg ID 83440				
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282						110. 7	daho Health Care Association 1524 W Cayuse Creek Dr Meridian ID 83646				
1 Holic. (200) 337-2032 1 ax. (200) 337-2202 1024 VV Odyddo											

### LOBBYIST MONTHLY REPORT FORM



#### State of Idaho

Ben Ysursa Secretary of State ODDITIST MONTHEL REPOR

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LOBBYISTS (Sec. 67-6619)

Page 2 of 3 Page(s)
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(Type or print clearly in black ink) See instructions at bottom of page

Lobbyist's name and permanent business address Date prepared Period covered Tony Smith month ending 2145 W. Quilceda St. 4-19-2013 Kuna, ID 83634 (Mo.) (Day) Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure \*Total Amount for Reimbursed Personal Living and Travel Item 3, at bottom of page.) Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 4 Employer No. 3 Entertainment 0.00 0.00 0.00 0.00 0.00 Food and Refreshment 0.00 0.00 0.00 0.00 0.00 Living Accommodations 0.00 0.00 0.00 0.00 0.00 Advertising 0.00 0.00 0.00 0.00 0.00 Travel 0.00 0.00 0.00 0.00 0.00 Telephone 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 \*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 one hundred five dollars (\$105) for a legislator, other holder of public office, executive officials and member(s) of their household. Item-Names of Legislators, Public and Executive Officials 2 Date Place Amount and Household Members in Group Continued on attached page(s) Item Employer(s) Name(s) and Address(es) INSTRUCTIONS Idaho Land Title Association No. 1 Who should file this form: Any lobbyist registered under Section 372 S Eagle Rd Ste 387 Eagle ID 83616 67-6617 Idaho Code Idaho Midwifery Council Filing deadline: Monthly reports due within fifteen (15) days of the No. 2 3888 Coyote Wy Bonners Ferry ID 83805 month for activities of the past month. TO BE FILED WITH: Idaho Optometric Association No. 3 Ben Ysursa 11368 W Hickory Hill Ct Boise ID 83713 Secretary of State PO Box 83720 Idaho State Broadcasters Association Boise, ID 83720-0080 No. 4 1674 Hill Rd Boise ID 83702 Phone: (208) 334-2852 Fax: (208) 334-2282

# LOBBYIST MONTHLY REPORT FORM



## State of Idaho

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**LOBBYISTS** (Sec. 67-6619)

Page 3 of 3 Page(s) THIS SPACE FOR OFFICE USE ONLY

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SLURCIARY 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 Date prepared Period covered

Tony Smith 2145 W. Quilceda St. Kuna, ID 83634

4-19-13

month ending

(Mo.)

Item 1	Totals of all reportab	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.							
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	7 til Employets	Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4			
Entertair Food and	nment d Refreshment	s_ 0.00	s0.00	\$0.00	s0.00	\$0.00			
Living A	accommodations	0.00	0.00	0.00	0.00	0.00			
Advertis	ing	0.00	0.00	0.00	0.00	0.00			
Travel		0.00	0.00	0.00	0.00	0.00			
Telephor	ne	0.00	0.00	0.00	0.00	0.00			
Other Ex	openses or Services	0.00	0.00	0.00	0.00	0.00			
	Total	\$0.00	\$0.00	\$0.00	\$0.00	s0.00			

\*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.

The totals of each expenditure of more than one hundred five dollars (\$105) for a legislator, other holder of public office, executive officials and member(s) of their household. Item-Names of Legislators, Public and Executive Officials 2 Place Amount and Household Members in Group Date Continued on attached page(s)

Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code

INSTRUCTIONS

Northwest Career Colleges Federation No. 1 4200 6th Ave NE Ste313 Lacey WA 98503

Employer(s) Name(s) and Address(es)

Filing deadline: Monthly reports due within fifteen (15) days of the

No. 2

month for activities of the past month.

TO BE FILED WITH:

Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080

Phone: (208) 334-2852 Fax: (208) 334-2282

No. 3

Item 3

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					
(from		Bill, Resolution or Other Legislative Ident. Number		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, municipal Government, special districts Government, state	Code 17  18 19 20 21 22 23 24 25 26  27 28  29 30 31	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)		
Item 5	bid or l	y any rule, ratemaking decisio oid process, financial services opposing.	on, procurement, contract, or bond lobbyist was support-	CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.  Tourist 4-19-13  Lobbyist Signature Date					

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