Rev. 12/2012

## 3854 3854

## State of Idaho

Ben Ysursa Secretary of State

## LOBBYIST MONTHLY REPORT FORM

To Be Filed By:

L-3

LOBBYISTS (Sec. 67-6619)

Page 1 of 2 Page(s) THIS SPACE FOR OFFICE USE ONLY

11 MAR 13 PM 2:49

STATE OF STATE

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

Lobbyist's name and permanent business address							Date prepared			Period covered			
Dawn Justice							3/12/14			X month ending			
Idaho Bankers Association													
P.O. Box 638										(Day)	(Yr.)		
Boise, ID 83701					****				2	28	2014		
Item 1	Totals	of all reportab	ole expenditures made o	r incurred by	Lobby	ist or	by Lobbyist's Empl	oyer on behalf o	of Lobbyi	ist's Emplo	yer.		
Ca	tegory of Ex		<b>***</b> . 1	unts contributed by each employer (Identify employers, under									
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			*Total Amount for All Employers	Item 3, at bottom of				·					
				Employer No. 1			Employer No. 2	Employer No. 3		Employer No. 4			
Entertainment Food and Refreshment			s 40.00	s_40.00			\$	s		\$			
Living A	Accommodat	ions											
Adverti	sing												
Travel													
Telepho	ne		40.00	00.00									
Other Expenses or Services			40.00	40.00									
Total			s 120,00	s 20.00			\$	\$		\$	······································		
*11/6			! .rc reporting for requires m	ultinla I 2 for	me to be	l Glad	a total amount for all a	l mployers should l	l he enterod	on Page 1			
Which			liture of more than one								ve officials		
Item-	and member(s) of their household.												
2	Date		Place						ors, Public and Executive Officials chold Members in Group				
				7				and Household Premotes in Group			···		
	Continued on a	ttached pagc(s)								*			
INSTRUCTIONS						Iten 3	n Eı	nployer(s) Name(	s) and Add	dress(cs)			
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code  Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.  TO BE FILED WITH:							Idaho Bankers Association						
							P.O. Box 638,						
							No. 2						
Ben Ysursa							No. 3						
Secretary of State PO Box 83720													
Boise, ID 83720-0080						No. 4							
Phone: (208) 334-2852 Fax: (208) 334-2282													

Item	Subje	ect matter of proposed legislat	ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION						
4		or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.		Code Subject			Subject			
Subject Code (from table)		Bill, Resolution or Other Legislative Ident, Number  H 44 9  H 40 0  S 138 2 AA  S 131 4  H S 11  S 13 S 444  J-1 S A 4	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	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, conscrvation, 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, federal Government, municipal Government, special districts Government, state	17  18 19 20 21 22 23 24 25 26  27 28  29 30 31	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	I hid or hid process financial convices or hand labburet was support				CERTIFICATION: I hereby certify to correct statement in accordance with					
				I	obbyist signature		Date			